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# Computerized Patient Record System (CPRS)

**Version 1.0**

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## Setup Guide

**August 2000**



Department of Veterans Affairs  
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Computerized Patient Record System Product Line

## Revision History

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Date	Page	Change
10/14/98	138	Added information about ORMTIME
10/15/98	14	Added explanation of global journaling
10/20/98	ii	Added this revision history page
10/22/98	100	Added description for <i>Enter/Edit Actions</i>
11/4/98	110	Added description for new option, <i>List Primary Order Menus</i>
11/20/98	193	Added printing from GUI to troubleshooting tips
11/30/98	142	Added more detailed description for Inconsistency Checker option (ORE LAB ORDERS CHECK 100=>69)
12/7/98	33	Added new parameters in Miscellaneous Parameters
12/18/98	197	Added troubleshooting info re Vitals corrections, Radiology errors, and Patient Confidentiality issues
12/18/98	32, 151	Added information about creating Add Orders menu and making it available through the GUI; also how to add items to the Write Orders list
1/15/99	157	Added hardware recommendations
3/22/99	32, 109	Corrected info about adding order menus for the GUI
5/25/99	23	Corrected info about electronic signature
5/25/99	17	Corrected info about XQALERT FORWARD
5/26/99	19	Added description of new option: Auto-DC Parameters
6/21/99	36	Added description of Document Templates
7/8/99		
3/7/2000	174	Changed DGPM Movement Event order example.
6/28/2000	4, 5, 61-62, 64, 66, 67, 78	Changed references to drug-drug interaction to Critical Drug Interaction and added information about a new order check: Significant drug interaction
6/29/2000	24	Added note that release of outpatient meds must be through signature of authorized provider.
8/21/2000	50-61	Updated Flagged Orderable Items material and examples to reflect the current state of notifications.

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# I. Introduction

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## Purpose of CPRS Setup Guide

This guide is directed towards staff in IRMS and Clinical Coordinators who will be implementing the CPRS package for their local medical center.

### Post-Installation Set-up

This guide contains instructions for setting up or editing parameters, menus, notifications, order checking, etc. It primarily focuses on CPRS core implementation (OE/RR), but it also gives a summary of set-up for the other packages interfacing within CPRS. For complete details on implementation of those packages, see their package documentation.

### Troubleshooting & Tricks

This section contains additional information gleaned from test sites and others that may be helpful to you.

## Current Users of OE/RR 2.5

Version 1.0 of CPRS (both the GUI and List Manager versions) requires many of the same planning and set-up steps as OE/RR 2.5. Most of the set-up applies to both user interfaces. If you implemented OE/RR 2.5, most of the work you did for 2.5 can be converted with the utilities developed for CPRS. The Pre-installation patch (OR\*2.5\*49) helps you convert menus, quick orders, and parameters for conversion.

## Sites or Services not using OE/RR 2.5

Your site will require more preparation and setup to customize menus, protocols, quick orders, and parameters. Instructions in this manual can help you with this. You can use options on the Order Menu Management menu (distributed with the pre-installation patch, OR\*2.5\*49, or on the CPRS Configuration Menu when CPRS is installed) to begin creating menus, quick orders, and parameters.

## CPRS Web Page

[vista.med.va.gov/cprs/](http://vista.med.va.gov/cprs/)

## Overview of CPRS

CPRS provides clinicians, managers, support staff, researchers, and others an integrated patient record system. VISTA software for Pharmacy, Lab, Radiology, Allergy Tracking, Consults, Dietetics, Progress Notes, Problem List, Scheduling, MAS (A/D/T), Kernel, FileManager, Vitals, PCMM, PCE, TIU, ASU and Clinical Lexicon packages was written or modified to support and communicate with CPRS. OE/RR was completely re-written. Together, these clinical components of VISTA provide a single interface for physicians to manage patient care and records, as well as an efficient means for others to access and use patient information.

### Features:

- ***Smooth transition from OE/RR*** When a VAMC installs CPRS, a fully automated process converts existing orders, order dialogs, orderable items, medications, labs, consults, clinical notifications and other components into CPRS. No patient data is lost and little or no manual conversion is required. Installation of CPRS only requires 1-2 hours of system downtime, with little impact on users and patient care. Because of its “user-friendly” design, most VA clinicians can use CPRS with minimal training.
- ***OE/RR core module.*** All basic CPRS tasks occur within the M environment. Tasks relegated to the GUI workstation include those necessary to communicate with the server and to present and obtain data. Specific components of the core M module for OE/RR include:
  - *Order processing and storage.* Processing orders in CPRS includes: 1) order dialog presentation, 2) order checking, 3) appropriate holding/processing/status assignment related to user credentials, order signature status, and filling package, 4) HL7 formatting, and 5) event posting for filling package and other interested parties, 6) receiving order status messages from filling package, and 7) updating the appropriate data files. Order storage in CPRS includes a complete, date/time-stamped history of all events related to the order including status changes, ordering, requesting, and signatory personnel, related order checks, and override reason, flagged order data, and various components related to the filling package.
  - *Mechanism for clinical orderable items.* Orderable items are phrased in physician-friendly terms, centrally stored and can be updated at individual VAMCs. Updating is coordinated between OE/RR core and ancillary packages via HL7 messages.
  - *Flagged orders.* An order can be flagged when it requires special attention. A notification regarding the flagged order is sent to appropriate caregivers assigned to the patient.
  - *Electronic signature.* Orderable items can be assigned varying degrees of electronic signature requirements. Unsigned orders trigger a notification to appropriate patient caregivers.



## *CPRS Overview, cont'd*

- *Encounter management.* Orders are linked with specific patient encounters, facilitating point-of-care management and data exchange with encounter-oriented management processes.
  - *Patient selection.* Extensive patient selection capabilities allow physicians to build patient lists based on ward, room-bed, clinic appointment, patient's primary provider/attending physician, team and individual patient. Once created, providers' preferred patient lists are automatically loaded when they access CPRS. For example, a provider can set up a patient list based on each day's clinic appointments. This list is built automatically each day and displayed to facilitate easier patient selection.
- **List Manager Interface.** Non-GUI, ANSI terminals use the CPRS List Manager interface. Designed with a great deal of clinician usability feedback, this interface displays allergies, lab results, medications, existing orders, consults, and other clinical data in a format conducive to decision making. The order entry process has been streamlined to gather the most pertinent information necessary to fill the order.
- **GUI Interface.** Clinical workstations in the Windows environment access CPRS through a Delphi-based Graphical User Interface (GUI). Based on years of prototyping, usability studies, and actual clinical use, the CPRS GUI is a full implementation of results reporting and order entry. It communicates with CPRS server processes through the Kernel Broker client-server utility. Data is exchanged via an extensive list of remote procedure calls.
- **HL7 Messaging/Event Processing.** Communication between VISTA packages participating in CPRS is accomplished primarily through event-driven HL7 messaging. This approach allows multiple processes to subscribe to a single CPRS event. The structure and content of the HL7 message provides consistent data for processes subscribing to an event. Additional application programmer interfaces (APIs) exist between OE/RR and ancillary packages to provide data not supported by HL7.
- **VAMC Parameters and Defaults.** Every VAMC has specialized needs regarding CPRS functionality and processing. To allow variation and modification among VAMCs, CPRS provides a hierarchically structured set of parameters. Each parameter can have a user, team, service/section, patient location, division, system, and package value. The extensive set of parameters exported with CPRS allows VAMC administrators and CPRS users to fine-tune the functionalities and processes specific to their needs.
- **Remote Procedure Calls.** Generically written data extraction/storage remote procedure calls (RPCs) provide access to VISTA clinical data for CPRS interfaces, VAMC-developed software, and HOST/COTS applications.

## *CPRS Overview, cont'd*

- ***Consult/Request Tracking.*** A fully functional consulting package is exported with CPRS. Integrated tightly with CPRS, consults provides consult ordering/requesting, tracking, and resulting. Consulting events such as requesting and resulting trigger notifications to appropriate health care providers, who can then quickly react to the request or result.
- ***Patient/Team Lists.*** Patient and Team List functionality in CPRS provides several methods for linking health care providers with patients. Team relationships can be based on ward, room-bed, provider, specialty, and/or clinic. Membership is updated automatically when patients are admitted, discharged, transferred, or assigned to a clinic.
- ***Expert System.*** The CPRS Expert System is a modular, rule-oriented, knowledge-based system. It supports CPRS as the basis for real-time order checking (e.g. critical drug interactions, duplicate orders) and background notifications (e.g. critical lab results, expiring medications.) Components include: a Meta-Dictionary for linking discrete medical concepts with data located in files, messages and dialogs; a Rule Editor for creating and editing medical logic modules (MLMs) or rules which relate meta-dictionary concepts in logical expressions; an Inferencing Engine for processing the rules against data; and a Router for distributing results or messages.
- ***Clinical Notifications.*** The Notifications component generates patient-specific clinical alerts regarding order entry, consult, radiology, lab, pharmacy, dietetics, and A/D/T information. Alerts are displayed to **VISTA** users when they sign onto the computer. They can also be delivered to printers, files, and terminals. Many alerts allow recipients to take related follow-up actions. For example, a patient's unsigned order triggers an alert to appropriate health care providers. When a recipient selects the alert, the follow-up action displays the patient's unsigned orders and prompts for electronic signature. Via parameters, VAMCs can disable or enable notifications for users, teams, patient locations, services, divisions, and systems.
- ***Order Checking.*** Order Checks are messages interactively displayed to the ordering provider during an ordering session. They occur in real-time and are driven by responses entered by the ordering provider in conjunction with existing patient data. Order Checks are rated according to potential clinical danger level. Order check messages with a low or moderate clinical danger level can be ignored. High clinical danger level order checks require the entry of a reason if they are overridden. This information is passed on to the filling package (e.g. pharmacy) as part of the order. All order check messages include a prompt to cancel or change the order. Via parameters, VAMCs can adjust order check clinical danger levels and disable or enable order checks for users, teams, patient locations, services, divisions, and systems.

## Differences between OE/RR 2.5 and CPRS

OE/RR 2.5	CPRS 1.0
1- Screen-like interface	Windows and List Manager interfaces
2- "Backdoor" packages controlled ordering dialogs	CPRS controls all the ordering dialogs
3- Multiple patient selection available	Only single patient selection is available except through the Results Reporting Menu
4- Select an action, then an item	You now select an item then an action
5- Navigation of electronic record took place through a menu structure of options and protocols	The List Manager version allows navigation through the electronic record by way of actions that are equivalent to the tabs of a chart; GUI version allows navigation by clicking on tabs
6- Outpatient Pharmacy ordering not available through OE/RR	Outpatient Pharmacy is now available
7- Consults resulting and tracking not available through OE/RR	Consults fully accessible through CPRS
8- No access to Discharge Summary	Discharge Summary is now available thru CPRS
9- No time-delay ordering capability	Time-delayed orders now available (admission, discharge, and transfer)
10- Actions available for orders: <ul style="list-style-type: none"> <li>• Discontinue Orders</li> <li>• Edit Orders</li> <li>• Hold/Unhold Orders</li> <li>• Flag/Unflag Orders</li> <li>• Renew Orders</li> <li>• Comments for Ward/Clinic</li> <li>• Signature on Chart</li> <li>• Results Display</li> <li>• Long/Short Order Format</li> <li>• Detailed Order Display</li> <li>• Print Orders</li> <li>• Print Labels</li> <li>• Requisition Print</li> <li>• Print Chart Copy</li> <li>• Print Service Copy</li> <li>• Accept Orders</li> </ul>	More actions available for orders: <ul style="list-style-type: none"> <li>• Copy</li> <li>• Discontinue</li> <li>• Change</li> <li>• Hold</li> <li>• Release Hold</li> <li>• Flag</li> <li>• Unflag</li> <li>• Renew</li> <li>• Verify</li> <li>• Ward Comments</li> <li>• Sign/On Chart</li> <li>• Results</li> <li>• Details</li> <li>• Print List and Print Screen (List Manager actions)</li> <li>• Print Labels</li> <li>• Print Requisitions</li> <li>• Print Chart Copies</li> <li>• Print Service Copies</li> <li>• Print Work Copies</li> </ul>
11- Duplicate order was the only order check	Twenty-one Order checks now available ALLERGY-CONTRAST MEDIA INTERAC ALLERGY-DRUG INTERACTION AMINOGLYCOSIDE ORDERED BIOCHEM ABNORMALITY FOR CONTRA CLOZAPINE APPROPRIATENESS CRITICAL DRUG INTERACTION CT & MRI PHYSICAL LIMITATIONS DISPENSE DRUG NOT SELECTED DUPLICATE DRUG CLASS ORDER DUPLICATE DRUG ORDER

<b>OE/RR 2.5</b>	<b>CPRS 1.0</b>
11- Order checks, cont'd	DUPLICATE ORDER ERROR MESSAGE ESTIMATED CREATININE CLEARANCE GLUCOPHAGE-CONTRAST MEDIA LAB ORDER FREQ RESTRICTIONS MISSING LAB TESTS FOR ANGIOGRA ORDER CHECKING NOT AVAILABLE POLYPHARMACY RECENT BARIUM STUDY RECENT ORAL CHOLECYSTOGRAM RENAL FUNCTIONS OVER AGE 65
12- Twenty-three Notifications available	Forty Notifications now available LAB RESULTS ORDER REQUIRES CHART SIGNATURE FLAGGED ORDERS ORDER REQUIRES ELEC SIGNATURE ABNORMAL LAB RESULTS (ACTION) ADMISSION UNSCHEDULED VISIT DECEASED PATIENT IMAGING PATIENT EXAMINED IMAGING RESULTS CONSULT/REQUEST RESOLUTION CRITICAL LAB RESULT (INFO) ABNORMAL IMAGING RESULTS IMAGING REQUEST CANCEL/HELD NEW SERVICE CONSULT/REQUEST SERVICE ORDER REQ CHART SIGN CONSULT/REQUEST CANCEL/HOLD NPO DIET MORE THAN 72 HRS SITE-FLAGGED RESULTS ORDERER-FLAGGED RESULTS DISCHARGE TRANSFER FROM PSYCHIATRY ORDER REQUIRES CO-SIGNATURE SITE-FLAGGED ORDER LAB ORDER CANCELED STAT ORDER STAT RESULTS DNR EXPIRING FREE TEXT MEDICATIONS EXPIRING UNVERIFIED MEDICATION ORDER NEW ORDER STAT IMAGING REQUEST URGENT IMAGING REQUEST IMAGING RESULTS AMENDED ORDER CHECK FOOD/DRUG INTERACTION ERROR MESSAGE CRITICAL LAB RESULTS (ACTION) ABNORMAL LAB RESULT (INFO)
13- Processing action for notifications exported by OE/RR	The site can now control the processing action
14- Problem list available only outside OE/RR	Problem List now has a tab in CPRS
15- No patient data overview available	The Cover Sheet provides a clinical overview of the patient.

## II. Preparation & Implementation Checklist

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### *Recommended Pre-Installation/Implementation Activities*

#### **1. Facility activities before CPRS**

- ☐ Establish CPRS Implementation committee composed of service chiefs, clinicians, Clinical Application Coordinators (CACs), upper management, and IRM
- ☐ Create Mail Groups for CPRS Super Users, CPRS Admin., and CPRS CACs
- ☐ Recruit a Clinical Champion who is well respected by the clinicians and who can dedicate time to CPRS activities. At both West Palm Beach and Puget Sound, the Clinical Champions assumed the “lion’s share” of the responsibility for making sure their staff were familiar with CPRS before going live.
- ☐ Establish a schedule for CPRS Orientation Kick-Off
- ☐ Establish a Training Schedule for CPRS Super Users and End Users
- ☐ Establish a Training Schedule for Pharmacy Super Users and End Users

#### **2. Production activities before CPRS is installed into test**

- ☐ Implement Pharmacy Data Management and TIU in Production
- ☐ Create Mirror Image of Production Account for CPRS Test Environment

#### **3. Test account activities before CPRS**

- ☐ Disable Domains that transmit data, e.g., workload transmittals, PDM transmittals
- ☐ Review Printer set-ups; make sure that printers in patient care areas and supporting areas such as Lab and Pharmacy are NOT defined for use by applications in the test account
- ☐ Review tasked jobs and unschedule tasks that don’t need to be run
- ☐ Install test patches required for CPRS
- ☐ Install OR\*2.5\*49
- ☐ Review protocols that did not convert to Orderable Items
- ☐ Exercise all the options introduced by OR\*2.5\*49

## *Pre-Installation/Implementation Activities, cont'd*

### **4. Facility Activities after CPRS is installed into test**

- ☐ *Orient your staff to CPRS:* Use existing service meetings to discuss the impact of CPRS. For example, one of your clinical champions may want to attend the Medical Service, Surgical Service, and Ambulatory Care committee meetings to orient the clinicians to CPRS and discuss potential problems and solutions related to patient care practices and the software. West Palm Beach used those meetings to discuss CPRS and exercise the software as a group where each individual played a different role. It was really helpful in terms of making sure all aspects of the software were exercised and in establishing CPRS expertise in key clinicians, ADPACs, and CACs.
- ☐ *Emphasize the impact of installing CPRS:* It is important that your staff understands the impact that the installation of CPRS into production will have on all the current OERR 2.5 users as well as the Outpatient and Inpatient Pharmacy users.
- ☐ *Review site-specific menus:* Make sure that menus created specifically for your site have been reviewed and modified as needed to include CPRS options. Make sure that these changes are documented so that when CPRS is installed into production the changes can be transferred easily.
- ☐ *Exercise every aspect of CPRS:* Make sure that all OE/RR 2.5 users have exercised CPRS functionality that relates to their work processes. Encourage them to exercise the software for at least 4 hours.
- ☐ *Assign individuals to become experts in CPRS functional areas:*

#### **A. CPRS Configuration:**

Establish an understanding of CPRS management.

##### *CPRS Configuration (Clin Coord) Options:*

Allocate OE/RR Security Keys
Check for Multiple Keys
Edit DC Reasons
GUI Parameters ...
Miscellaneous Parameters
Notification Mgmt
Order Checking Mgmt
Order Menu Management
Patient List Mgmt
Print Formats
Print/Report Parameters
Release/Cancel Delayed Orders

## ***Pre-Installation/Implementation Activities, cont'd***

### ***CPRS Configuration (IRM) Options:***

Order Check Expert System Main Menu ...
ORMTIME Main Menu ...
CPRS Clean-up Utilities ...
General Parameter Tools ...

## **B. Consults**

Establish a good understanding of how to set up services as well as all the consult actions that can be taken on a consult. A Consult expert must be able to help users manage consults through CPRS, TIU, and Consults Requests/Tracking.

Receive	Forward	Add Comments
Cancel	Discontinue	Detailed Display
Complete	Make Addendum	Print SF 513

## **C. Order Checks**

Establish a good understanding of what triggers an order check as well as how to manage order checks.

### ***Management Options***

Enable/Disable an Order Check
Set Clinical Danger Level for an Order Check
CT Scanner Height Limit
CT Scanner Weight Limit
MRI Scanner Height Limit
MRI Scanner Weight Limit
Orderable Item Duplicate Order Range
Lab Duplicate Order Range
Radiology Duplicate Order Range
Enable or Disable Order Checking System
Enable or Disable Debug Message Logging
Display the Order Checks a User Can Receive
Link Local Terms with Nat'l Expert System Terms

## **D. Notifications:**

Establish a good understanding of what triggers a notification, as well as how to manage notifications.

### ***Management Options***

- |   |   |
|---|---|
| 1 | Enable/Disable Notifications                      |
| 2 | Erase Notifications                               |
| 3 | Set Urgency for Notifications (GUI)               |
| 4 | Set Deletion Parameters for Notifications         |
| 5 | Set Default Recipient(s) for Notifications        |
| 6 | Set Default Recipient Device(s) for Notifications |
| 7 | Set Provider Recipients for Notifications         |
| 8 | Flag Orderable Item(s) to Send Notifications      |

## ***Pre-Installation/Implementation Activities, cont'd***

### ***Notifications Management Options, cont'd***

- |    |   |
|----|---|
| 9  | Archive(delete) after <x> Days                  |
| 10 | Forward Notifications ...                       |
| 11 | Set Delays for Unverified Orders ...            |
| 12 | Set Notification Display Sort Method (GUI)      |
| 13 | Send Flagged Orders Bulletin                    |
| 14 | Determine Recipients for a Notification         |
| 15 | Display Patient Alerts and Alert Recipients     |
| 16 | Enable or Disable Notification System           |
| 17 | Display the Notifications a User Can Receive    |
| 18 | Set Surrogate Notification Recipient for a User |

### **E. Order Management**

Establish a good understanding of all the actions that can be taken on an order for each category of order such as Radiology, Pharmacy, Laboratory, Dietetics, and Consults.

Change	Sign on Chart	Flag	Verify	Details
Renew	Hold	Unflag	Copy	Results Discontinue
Print...	Release Hold	Ward Comments		

### **F. Time Delay Orders**

Establish a good understanding of how time-delayed orders are placed and activated

### **G. Transfer Inpatient Medication Orders to Outpatient Medication Orders**

Establish a good understanding of how orders are transferred from inpatient to outpatient and vice versa.

- ☐ *Establish consistent use of the software:* Not everyone in the medical center uses the software the same way. For instance, in one service a consult may be considered complete after the physician in the receiving service sees the patient and enters a result. In another service the request may be considered complete if the patient was given a scheduled appointment. Many of these things are process issues, but they need to be tested in each specialty, to make sure every one is using the same rulebook.
- ☐ *Review Clinical Practices and Administrative Process Work Flows:* Ensure that patient care practices that are specific to your site are carefully reviewed and tested/implemented via CPRS functionality.



## ***Pre-Installation/Implementation Activities, cont'd***

### *Collect several charts from selected clinical areas*

- Replicate the ordering process as noted in those charts in CPRS
- Note timeliness, optimal menus, user configurations, print features, displays etc
- Modify the software configurations to accommodate these user groups/clinical areas
- Save your discoveries for configuring the production account

## **5. Facility activities two weeks before CPRS is installed into production**

- ☐ *Alert all CPRS users:* At least one-two weeks before your production installation date, remind your CPRS users that CPRS is coming and that they need to be familiar with the software functionality that will impact them. Offer additional training classes. West Palm Beach administered competency tests to all their users to assess their understanding of how the software functions. An example of a competency test is included with this checklist.
- ☐ *Modify your computer sign-on bulletin:* Consider adding a statement to your computer sign-on bulletin one week before CPRS is installed, informing users that CPRS is coming. Include the scheduled CPRS installation time as well as the expected downtime. We recommend that you consider installing CPRS around 8:00pm on a Friday and plan for at least 2-3 hours downtime.
- ☐ *Create a schedule of patient care areas where CPRS will be implemented:* Create a schedule assigning Super Users and CACs to patient care areas during the first week of CPRS implementation. Staff will need to be scheduled for every shift on every patient care location. You will also need to create an on-call schedule for the most experienced users, e.g., your CACs. Include in that list one or more clinicians who are experts in the software.
- ☐ *Create a protocol for obtaining CPRS help:* During the first week of implementation, it is common for users who are not familiar with CPRS to get lost in the software. Create a protocol for obtaining CPRS help and distribute it to all CPRS Users.
- ☐ *Identify patient care areas that may be problematic:* Avoid potential disasters in patient care areas that require special considerations by anticipating problems and identifying solutions before CPRS is implemented.

### ***Pre-Installation/Implementation Activities, cont'd***

- ☐ *Assign installation/implementation responsibilities to staff:* Identify which staff will be available for the installation and what their responsibilities will be related to parameter review, printer set-up reviews, exercising the software, and patient care area patrols.
- ☐ *Assign a CPRS Command Center Coordinator:* Identify the individual at your site who will be the responsible individual at the CPRS Command Center. This individual will need to have a complete understanding of all CPRS functionality and will need to know your staff and the unique problems that could be encountered.

### **IRM Activities Just Before CPRS is Installed**

- ☐ *Read the CPRS Installation and Setup Guides:* Make sure you have thoroughly read the CPRS Installation Guide and the CPRS Setup Guide several days before your installation date. Resolve any questions that arise.
- ☐ *Back up your system:* Make a backup of your system no later than the day before you install CPRS.
- ☐ *Ensure that you have adequate disk space:* Make sure you have at least 300-400 mg free disk space before installing CPRS.
- ☐ *Ensure that you have adequate journal space:* Make sure you have adequate journal space available to enable journaling after CPRS is installed. The conversion will continue for approximately 24 – 48 hours after CPRS is installed. You will need to monitor your journal space during the time that the conversion is running.
- ☐ *XQALERT DELETE OLD--Delete Old (>14 d) Alerts:* Make sure you schedule this option to run daily. If Notifications/Alerts are enabled through CPRS, the ^XTV global will experience a significant growth. Ensuring that this option is run on a daily basis will manage the growth of ^XTV.
- ☐ *Establish downtime procedures:* When CPRS is installed, plan for at least 2-3 hours of downtime. Advise your users and establish downtime procedures.
- ☐ *Allocate OE/RR keys to new CPRS users:* Allocate OE/RR keys to CPRS users who weren't OE/RR 2.5 users. CPRS uses the same keys as OE/RR 2.5.

## CPRS Competency Assessment

#	ACTIVITY	Ok	Needs Help
1	Renew Current Orders		
2	Discontinue Current Orders		
3	Review Results of Completed Orders		
4	<b>Progress Notes</b> <ul style="list-style-type: none"> <li>• Enter a Telephone Contact progress note from the Notes Tab.</li> <li>• Create a <i>new</i> telephone visit to a telephone clinic; use a diagnosis of your choice and a telephone CPT code of 99371 as the procedure for the visit.</li> <li>• View a list of Progress Notes</li> <li>• Pick one of the authors on the list of notes and display a list of all the notes by that author.</li> </ul>		
5	Write New Problems (Problem List) <ul style="list-style-type: none"> <li>• Add a problem to the problem list on a patient.</li> <li>• Print the active problems on this patient</li> </ul>		
6	Add Allergies <ul style="list-style-type: none"> <li>• Add a new allergy for the patient</li> </ul>		
7	<b>Pharmacy Orders</b> <ul style="list-style-type: none"> <li>• Enter/Sign Order for any outpatient medication for hypertension or CHF.</li> <li>• Enter/Sign Order for any inpatient medication for hypertension or CHF</li> <li>• DC all IV fluid orders</li> <li>• Enter an order for IV fluids d5 ½ NS with 2g Mg, 20 meq KCL 120 cc/hr</li> <li>• Imagine that you are admitting an outpatient to the hospital. Choose one of the outpatient medications and transfer it to inpatient status.</li> </ul>		
8	Lab Orders <ul style="list-style-type: none"> <li>• Enter/Sign Orders for a CBC &amp; diff, Chem 7 and sputum C&amp;S and gram stain</li> <li>• Using the orders tab, print a list of pending lab orders</li> </ul>		
9	Diet Orders <ul style="list-style-type: none"> <li>• Enter an NPO Diet order</li> <li>• Enter a “Regular” Diet order</li> </ul>		
10	Consults <ul style="list-style-type: none"> <li>• Request a Consult</li> <li>• Receive a Consult</li> <li>• Forward a Consult</li> <li>• Complete a Consult</li> <li>• Result Consults in Consult Tab of CPRS, in TIU, and in the Consult package</li> <li>• Define a Team for a Consult Service</li> </ul>		
11	Radiology Orders <ul style="list-style-type: none"> <li>• Enter a radiology Order</li> <li>• Print the last radiology result</li> </ul>		

#	ACTIVITY	Ok	Needs Help
12	Nursing Orders <ul style="list-style-type: none"> <li>• Enter an order to turn the patient</li> <li>• Display a list of active nursing orders</li> </ul>		
13	Reports Tab <ul style="list-style-type: none"> <li>• Review Outpatient RX Profile</li> <li>• Review Dietetic Profile</li> <li>• Review Lab Reports</li> <li>• Review Health Summary Reports</li> <li>• Review Vital Reports</li> </ul>		
14	Work Through Admission Order Sets <ul style="list-style-type: none"> <li>• Place orders based on an admission order set</li> </ul>		
15	Patient Inquiry <ul style="list-style-type: none"> <li>• Get the patient's demographic information and find the patient's phone number.</li> </ul>		
16	CWAD <ul style="list-style-type: none"> <li>• Review the patient postings for a patient</li> </ul>		
17	Enter Time-Delay Orders <ul style="list-style-type: none"> <li>• Enter a time-delayed order for an immunization and a Pneumovax</li> <li>• Enter a time-delayed order for an imaging study.</li> </ul>		
18	Change your View of Patient Data by: <ul style="list-style-type: none"> <li>• Status</li> <li>• Date range</li> <li>• Service/Section</li> <li>• Short Format</li> </ul>		
19	Results Reporting Options		
20	Detailed Display: Look at the information included in a detailed display for: <ul style="list-style-type: none"> <li>• a lab order</li> <li>• a pharmacy order</li> <li>• a consult.</li> </ul>		
21	Verify Orders <ul style="list-style-type: none"> <li>• As a Nurse, Verify an Order</li> <li>• As a Ward Clerk, Verify an Order</li> <li>• View the Verified Orders through the Orders Tab</li> </ul>		
22	Review of List Manager Hidden Actions: <ul style="list-style-type: none"> <li>• + Next Screen</li> <li>• UP Up a Line</li> <li>• AD Add New Orders</li> <li>• - Previous Screen</li> <li>• DN Down a Line</li> <li>• RV Review New Orders</li> <li>• FS First Screen</li> <li>• &gt; Shift View to Right</li> <li>• CWAD Display CWAD Info</li> <li>• LS Last Screen</li> <li>• &lt; Shift View to Left</li> <li>• PI Patient Inquiry</li> <li>• GO Go to Page</li> <li>• PS Print Screen</li> </ul>		

#	ACTIVITY	Ok	Needs Help
22 cont'd	Review of List Manager Hidden Actions: <ul style="list-style-type: none"> <li>• SL Search List</li> <li>• RD Redisplay Screen</li> <li>• PT Print List</li> <li>• EX Exit</li> </ul> ADPL Auto Display On/Off		
23	List Patient by: <ul style="list-style-type: none"> <li>• Clinic</li> <li>• Primary Provider</li> <li>• Specialty</li> <li>• Ward</li> <li>• Team/Personal</li> <li>• Sort Order</li> </ul>		
24	Select New Patient		
25	Flag/Unflag Orders		
26	Patient List: Through Personal Preferences, create: <ul style="list-style-type: none"> <li>• Clinic Patient List</li> <li>• Provider Patient List</li> </ul>		
27	Notifications: Through Personal Preferences, <ul style="list-style-type: none"> <li>• Look at the Notifications you can receive</li> <li>• Enable the notifications you want to receive</li> </ul>		
28	Order Checks <ul style="list-style-type: none"> <li>• Look at the Order Checks you can receive</li> <li>• Enable the Order Checks you want to receive</li> </ul>		
29	Review Patient Selection Preferences <ul style="list-style-type: none"> <li>• Set My Preferred Clinic Start Date</li> <li>• Set My Preferred Clinic Stop Date</li> <li>• Set My Preferred Clinic Sunday</li> <li>• Set My Preferred Clinic Monday</li> <li>• Set My Preferred Clinic Tuesday</li> <li>• Set My Preferred Clinic Wednesday</li> <li>• Set My Preferred Clinic Thursday</li> <li>• Set My Preferred Clinic Friday</li> <li>• Set My Preferred Clinic Saturday</li> <li>• Set My Preferred Sort Order for Patient List</li> <li>• Set My Preferred List Source</li> <li>• Set My Preferred Primary Provider</li> <li>• Set My Preferred Treating Specialty</li> <li>• Set My Preferred Team List</li> <li>• Set My Preferred Ward</li> </ul>		

### III. CPRS Setup Instructions

---

This section contains instructions and information about setting up CPRS. It is organized according to the sequence of options on the CPRS Manager [ORMGR] Menu.

- A. OE/RR Clean-up
- B. CPRS Configuration (Clinical Coordinator)
  - 1. Electronic signature set-up/assigning security keys
  - 2. GUI setup
  - 3. Miscellaneous Parameters
  - 4. Notifications/alerts
  - 5. Order Checking
  - 6. Menu management
    - Order Menu Management
    - Menus and menu assignment
  - 7. Patient and team lists
  - 8. Printing set-up
    - Chart copies, labels, requisitions, and other copies
    - Print Formats
- C. CPRS Configuration (IRM)
  - 1. Order Check Expert System
  - 2. Purge and Task jobs (ORMTIME Menu)
  - 3. CPRS Clean-up Utilities ...
- D. Other CPRS Configuration
  - 1. List Manager Terminal Settings
  - 2. Nature of Order File

## A. OE/RR-CPRS Clean-up

---

We recommend cleaning up and re-setting various files, menus, and parameters before beginning to use CPRS.

### 1. CPRS Clean-up Utilities Menu

The Lab Order Checks options on this menu are used to check and clean up some files as you move from OE/RR 2.5 to CPRS.

### 2. Alerts

Clean up old alerts, either through the option Erase Notifications [ORB3 ERASE NOTIFICATIONS] or by running the Kernel utility XQUALERT DELETE OLD.

*Erase Notifications* lets you do one of the following:

1. Erase all notifications for a User
2. Erase all notifications for a Patient
3. Erase all instances of a notification (regardless of patient).

The XQUALERT DELETE OLD option can be queued to run regularly. You can set the number of days an alert is held with the option *Archive(delete) after <x> Days* [ORB3 ARCHIVE PERIOD] on the Notification Mgmt Menu. You can also designate that alerts be forwarded to a surrogate or supervisor after a certain number of days.

Because this option cleans up old alerts (the archives are still kept), it should be run daily/nightly.

### 3. Patient Lists

Review patient and team lists set up at your hospital to determine if they are all being used, or if some could be combined.

### 4. Lab pending orders

Go through lab orders, especially those with statuses of pending, to see if these are still active orders. Lab doesn't purge old orders as many packages do. At test sites, many inactive lab orders were shown as pending, which caused problems. Clean up your records by discontinuing lab orders you don't need.

## 5. Ward and clinic names

You may want to rename wards and clinics if you have defined a lot of wards and clinics, especially if many begin with the same standard identifiers.

*Examples:*

ATC/AL Dual Dx Gr

ATC/AL Dual Dx Indiv

ATC/AL Dual Dx Int Outpt Gp

It's hard to do look-ups on this kind of naming system.

## 6. Consults

If you had consults categorized as Progress Notes before the Consult/ Request Tracking link to TIU, you may want to delete these if you create new Document Classes and Titles for Consults.



## B. CPRS Configuration (Clinical Coordinator)

The options and functionality described in this section are in alphabetical order, as listed on the Clinical Coordinator's CPRS Configuration menu.

### CPRS Configuration (Clin Coord) Menu

AU	Auto-DC Parameters
AL	Allocate OE/RR Security Keys
KK	Check for Multiple Keys
DC	Edit DC Reasons
GP	GUI Parameters ...
MI	Miscellaneous Parameters
NO	Notification Mgmt Menu ...
OC	Order Checking Mgmt Menu ...
MM	Order Menu Management ...
LI	Patient List Mgmt Menu ...
FP	Print Formats
PR	Print/Report Parameters ...
RE	Release/Cancel Delayed Orders

# 1. Auto-DC Parameters

This option is for editing hospital-wide parameters that control how CPRS automatically discontinues orders on patient movements.

## Example:

```
Select CPRS Configuration (Clin Coord) Option: au Auto-DC Parameters

Auto-DC Parameters for System: OEX.ISC-SLC.VA.GOV
-----
DC Generic Orders on Admission                                NO
DC Generic Orders on Ward Transfer                            NO
DC on Specialty Change      ORDER ENTRY/RESULTS REPORTING YES
                           INPATIENT MEDICATIONS YES
-----
DC GENERIC ORDERS ON ADMISSION: NO// <Enter>
DC GENERIC ORDERS ON WARD TRANSFER: NO// <Enter>

For DC on Specialty Change -
Select PACKAGE: lab
   1  LAB HL7 OERR                      LR7O
   2  LAB MESSAGING                      LA7
   3  LAB ORDER ENTRY                    LRX
   4  LAB PRE-RELEASE OERR_V3           LR02
   5  LAB SERVICE                        LR
Press <RETURN> to see more, '^' to exit this list, OR
CHOOSE 1-5: 5 LAB SERVICE                LR
Are you adding LAB SERVICE as a new PACKAGE? Yes// <Enter> YES

PACKAGE: LAB SERVICE//<Enter> LAB SERVICE      LR LAB SERVICE
Value: y YES

For DC on Specialty Change -
Select PACKAGE: <Enter>
```

## **2. Key Assignment and Electronic Signature Set-up**

### **Allocate CPRS Security Keys**

Do not assign more than one of these keys per user.

#### **ORES**

- Assigned to users authorized to write and sign orders.
- Typically assigned to licensed physician.
- Allows holders to electronically sign orders.

#### **ORELSE**

- Assigned to users authorized to release physician's orders.
- Typically assigned to RN's.

#### **OREMAS**

- Assigned to users authorized to release patient orders as signed on chart.
- Typically assigned to Ward Clerks.

## Allocate CPRS Security Keys Example

```
Select CPRS Configuration (Clin Coord) Option: AL  Allocate OE/RR Security Keys

KEY: ORES

This key is given to users that are authorized to write orders in
the chart.  Users with this key can verify with their electronic
signature patient orders.

This key is typically given to licensed Physicians.

Orders entered by users with this key can be released to the ancillary
service for immediate action.

DO NOT give users both the ORES key and the ORELSE key.

Edit Holders? Yes// <Enter>    (Yes)

Select HOLDER: WELBY,MARCUS
                Added.

Select HOLDER: <Enter>
=====

KEY: ORELSE

This key is given to users that are authorized to release doctors
orders to an ancillary service for action.

This key is typically given to Nurses.
Users with this key are allowed to put verbal orders in the system
and release them to the service for action.

DO NOT give users both the ORES key and the ORELSE key.

Edit Holders? Yes// <Enter>    (Yes)

Select HOLDER: NURSE,BONNIE           BC
                Added.

Select HOLDER: <Enter>
=====

KEY: OREMAS

This is the key given to MAS Ward Clerks.  It allows the user to
specify patient orders as 'signed on chart' when entered, which
releases the orders to the service for action.  Users with this
key are not allowed to put verbal orders in the system.

Edit Holders? Yes// Y    (Yes)

Select HOLDER: WINTERTON,STEVEN B.      SBW
                Added.

Select HOLDER: <Enter>
=====
```

## Check for Multiple Keys

This option identifies users who have more than one OR key assigned. It also displays which keys they have.

Users with more than one key can encounter problems when adding orders.

Use the *Allocate CPRS Security Keys* option to delete and re-assign keys for the users listed.

```
Select CPRS Configuration (Clin Coord) Option: KK Check for Multiple Keys
This utility identifies users that have more than one OR key assigned.
Users with more than one key can encounter problems when adding orders.
Any users listed will need to have their Keys edited and correctly assigned.

Ok to continue? Yes//<Enter>      (Yes)
CLERK,BONNIE (1088) has more than 1 OR key:      ORES ORELSE OREMAS
WINTERTON,STEVEN B. (1117) has more than 1 OR key:  ORES OREMAS
MCDANIEL,DWIGHT (1119) has more than 1 OR key:     ORES ORELSE OREMAS
CEBELINSKI,GREG (1306) has more than 1 OR key:     ORES ORELSE OREMAS
ACKERMAN,SHIRLEY (1307) has more than 1 OR key:    ORELSE OREMAS
BROWN,STANLEY A. (1314) has more than 1 OR key:    ORES ORELSE OREMAS
CPRS,COORDINATOR (1340) has more than 1 OR key:    ORES ORELSE OREMAS
```


## Electronic Signature

An electronic signature is the private code that an authorized user types into the system after performing certain actions. For CPRS, it's used by clinicians entering orders. This signature has the same validity as the written signature on the chart.

Implementing electronic signature for CPRS is a four-step process:

1. Define the clinician as a provider in the NEW PERSON file.
2. Assign the clinician the Provider key (while in the NEW PERSON file).
2. Assign the ORES key to clinicians who have signature authority.
3. Assign electronic signature codes (this can be done by the coordinator, at the same time as defining the clinician as a provider in the NEW PERSON file, or by the clinician, using *Electronic Signature Code Edit* on the User's Toolbox menu. See instructions on following pages).

Users may have the ORES key but not have an electronic signature code, and will, therefore, not be allowed to electronically sign orders on the system.

 **NOTE:** Until ORES key holders have an electronic signature code, the system assumes that orders entered have been entered and manually signed "on chart"; orders are automatically released to the ancillary service for action.

Once ORES key holders have an electronic signature code, they will be prompted to enter the electronic signature after accepting the orders. If the electronic signature code is entered correctly, the orders are released to the ancillary services for action. If the electronic signature code is not entered, or is entered incorrectly, the orders are *not* released to the ancillary services for action, but are held in an unreleased/unsigned status. Key holders are given three chances to correctly enter their signature codes.

***GUI Review and Sign works as follows, according to signature status:***

***User has provider key only (med student):*** If there are notes the user can sign, the ES panel appears in Review/Sign Changes; otherwise it is hidden. Orders appear on the list with the checkbox grayed. If the ES is entered for documents, it is NOT applied to the orders.

***User has OREMAS key:*** If users (clerks) have entered notes for which they are the author AND orders on behalf of a provider, TWO review screens will appear—one prompting for ES for the things the clerk can sign (a note), and one to allow the clerk to process the orders (mark signed on chart).

***User has ORELSE key:*** Works the same as for clerks, but the user can also release the orders.

***User has ORES key:*** Sees the review screen with the ES prompting, both for notes and orders.

**Note:** Outpatient med orders cannot be released to pharmacy unless an authorized provider signs the order. Verbal, telephoned, and written orders are no longer accepted. You can read the rule for this on the intranet:  
<http://vaww.va.gov/publ/direc/health/manual/020704.htm>.

**Electronic Signature Edit option**

Key holders may enter or edit their electronic signature codes through the option, “Electronic Signature Edit,” on the User’s Toolbox menu. To change an existing code, the user must type in the current code and then enter the new one.

**Set-up of Electronic Signature**

If key holders forget their electronic signature codes, they must contact their IRM Service so that the old code can be deleted. Once this has been done, the user will be allowed to enter a new code without having to know the old code. IRM staff can delete the electronic signature code by editing the field, ELECTRONIC SIGNATURE CODE (20.4) in the NEW PERSON file (200), or by using the option, “Clear Electronic Signature Code [XUSESIG CLEAR].”

## Allocate CPRS Security Keys

1. Assign the appropriate keys to the appropriate users, using the CPRS Configuration (Clin Coord) option, *Allocate CPRS Security Keys*.
2. Users add their signature codes through the option, *Electronic Signature Code Edit*, on the User's Toolbox menu. Users with the ORES key will not see the electronic signature prompts until they do this.

If the ORES key holder hits Enter at the electronic signature prompt (in the List Manager version of CPRS), this dialogue appears:

```
You did not enter a signature code!  
...orders requiring signature will be marked as 'SIGNED ON CHART'.
```

Once ORES keyholders add their signature codes, they will see:

```
To electronically sign these orders...  
Enter Signature Code: (xxxxxxx) <hidden>  
SIGNED
```

4. Users with the ORELSE and OREMAS keys will see the following prompts after entering orders:

```
Select Action: Accept Orders// <Enter>    Accept Orders  
  
...insufficient signature authority  
NOT SIGNED  
Do you want to mark these orders as 'Signed on Chart'? YES// <Enter> (YES)
```

- 4 a. If ORELSE key holders answer no, the computer dialogue will be:

```
...insufficient signature authority  
NOT SIGNED  
Do you want to mark these orders as 'Signed on Chart'? YES// n (NO)  
These orders have not been signed by an authorized physician  
Do you still want to release these orders to the service? YES//<Enter>  
NATURE OF ORDER: VERBAL// <Enter>
```

- 4 b. If OREMAS key holders answer no, the dialogue will be :

```
...insufficient signature authority  
NOT SIGNED  
Do you want to mark these orders as 'Signed on Chart'? YES// n (NO)  
UNRELEASED ORDERS:  
$      PROTHROMBIN TIME BLOOD PLASMA LB #1971 WC
```

## Electronic Signature Code Edit [XUSESIG]

This option on the User's Toolbox menu (on any **VISTA** menu) lets you enter or change your initials, signature block information, or office phone number. You can also enter a new Electronic Signature Code or change an existing code. If you forget your existing signature code, you will have to have it deleted by your clinical coordinator or site manager before you can enter a new one.

This is the title that will appear on the Chart Copy

```
Select Option: tb   User's Toolbox
Select User's Toolbox Option: electronic Signature code Edit
This option is designed to permit you to enter or change your
Initials, Signature Block Information Office Phone number , and Voice
and Digital Pagers numbers. In addition, you are permitted to enter a
new Electronic Signature Code or to change an existing code.

INITIALS: JG// <Enter>
SIGNATURE BLOCK PRINTED NAME: ?
Enter your name as you want it to appear on official documents
SIGNATURE BLOCK PRINTED NAME: JOANN GREEN// ??
    The name entered must contain the surname of the user.

    This field can then contain the name of the user as they wish it
    to be displayed with the notation that they signed the document
    electronically.
    For example:  John R. Doe, M.D.    or    Fred A. Sample, RN.

SIGNATURE BLOCK TITLE: JOANN GREEN// ??
    This field should contain the title of the person who is
    electronically signing a document.  Examples of titles are Chief
    of Surgery, Dietician, Clinical Pharmacist, etc.  This title will
    print next to the name of the person who signs the document.  The
    person's name will be taken from the SIGNATURE BLOCK PRINTED NAME
    field.

SIGNATURE BLOCK TITLE: Chief of Surgery
OFFICE PHONE: 588-5844
ANALOG PAGER:
DIGITAL PAGER:
Enter your Current Signature Code: <hidden JG1234> SIGNATURE VERIFIED

ENTER NEW SIGNATURE CODE:<hidden JGREED>    SIGNATURE VERIFIED

Your typing will not show.
RE-ENTER SIGNATURE CODE FOR VERIFICATION:<hidden> JGREED

DONE
```

The signature code must be 6 to 20 characters in length with no control or lowercase characters.



### 3. Edit DC Reasons

This option allows you to enter or edit the possible reasons (as listed in the Order Reason file) for discontinuing orders. The exported reasons are:

Duplicate Orders  
Discharge  
Transfer  
Treating Specialty Change  
Admit  
Requesting Physician Cancelled  
Obsolete Order

#### Example

```
Select CPRS Configuration (Clin Coord) Option: Edit DC Reasons

Select DC REASON: Entered in error
  Are you adding 'Entered in error' as a new ORDER REASON? No// y (Yes)
  ORDER REASON NUMBER: 16// <Enter>
NAME: Entered in error// <Enter>
SYNONYM: ER
INACTIVE: <Enter>
NATURE OF ACTIVITY: ?
  Answer with NATURE OF ORDER NUMBER, or NAME, or CODE
  Do you want the entire 11-Entry NATURE OF ORDER List? y (Yes)
Choose from:
  1          WRITTEN          W
  2          VERBAL          V
  3          TELEPHONED      P
  4          SERVICE CORRECTION      S
  5          POLICY          I
  6          DUPLICATE      D
  7          REJECTED      X
  8          PHYSICIAN ENTERED      E
  9          AUTO          A
  10         CHANGED      C
  11         MAINTENANCE      M

NATURE OF ACTIVITY: 4
```

## 4. GUI Setup

### *Required Files:*

CPRSChart.exe	CPRS executable
CPRS.hlp	CPRS help file
HOSTS	should reside on the client already

### Steps for setting up the CPRS GUI

- a. Assign OR CPRS GUICHART as a secondary menu item to anyone who will be using the GUI.
- b. Make sure servers are listed in the HOSTS file. If necessary, modify the HOSTS file of each client (PC) to set the appropriate mappings between names and IP addresses. The HOSTS file is located as follows:

Version of Windows OS	File (Location and Name)
Windows 95	C:\WINDOWS\HOSTS
Windows NT 3.51	C:\WINDOWS\SYSTEM32\DRIVERS\ETC\HOSTS
Windows NT 4.0	C:\WINNT\SYSTEM32\DRIVERS\ETC\HOSTS

### Example of a Windows 95 HOSTS file

```
# Copyright (c) 1994 Microsoft Corp.
#
# This is a sample HOSTS file used by Microsoft TCP/IP for Chicago
#
# This file contains the mappings of IP addresses to host names. Each
# entry should be kept on an individual line. The IP address should
# be placed in the first column followed by the corresponding host name.
# The IP address and the host name should be separated by at least one
# space.
#
# Additionally, comments (such as these) may be inserted on individual
# lines or following the machine name denoted by a '#' symbol.
#
# For example:
#
#       102.54.94.97      rhino.acme.com          # source server
#       38.25.63.10      x.acme.com              # x client host
```

- 1) Move the cursor to the end of the last line displayed in the file.
- 2) Press the Enter Key to create a new line.
- 3) On the new line, enter the desired IP address beginning in the first column, as described in the example above. As recommended, add an appropriate IP address for the DHCPSEVER Host name as the next entry below 127.0.0.1.

- 3) After typing the IP address, type at least one space, and enter the Host name that corresponds to that IP address. As recommended, type in DHCPSEVER as the next entry below “loopback,”


For example, the entry for a server at your site with an IP address of 192.1.1.1 would look like this:

127.0.0.1	localhost	# loopback	----existing entry
192.1.1.1	DHCPSEVER	# cprs	----added entry

- 4) Repeat steps a - d until you have entered all of the IP addresses and corresponding Host names you wish to enter.
- 5) When your entries are complete, use Notepad's **File | Save** command to save the HOSTS file.

 **NOTE:** Do not save the HOSTS file with an extension; delete the .sam!

- 6) Close the HOSTS file.

 **NOTE:** The HOSTS file location on NT 4.0 Client is different from on WIN95. The CPRS executable attempts—using RPC Broker—to log in to the default DHCP server when CPRS executes. RPC Broker cannot find the HOSTS file, so it uses the default.

The best workaround is to create a shortcut to the CPRS executable on your PC:

- right click on the executable icon
- select “Properties”
- add s="your server name" p="your listener port" after the .exe command

For more information, see the *RPC Broker V.1.1 Systems Manual*.

- c. Copy the file CPRSChart1.0.exe and CPRS.hlp to the workstations or put the files in a shared directory on the network. Rename CPRSChart1.0.exe to CPRSChart.

- d. **(optional)** If desired, you can either create a shortcut or an icon for CPRSChart or add it to the Start menu.

## GUI Parameters

Option Text	Option Name	Description
GUI Cover Sheet Display Parameters	ORQ SEARCH RANGE MGR MENU	This option allows IRM staff to modify the default number of days to display on the cover sheet.
GUI Health Summary Types	ORW HEALTH SUMMARY TYPES	This option lets you set up a list of health summary types available in the CPRS GUI (on the Reports tab). Don't add health summaries that do additional prompting (such as for date ranges & occurrence limits), since the GUI can't support this type of prompting.
GUI Tool Menu Items	ORW TOOL MENU ITEMS	This option lets you add items that will appear on your Tools menu in the CPRS GUI. Items that appear on the tools menu should be Windows executable files.

### GUI Cover Sheet Display Parameters Menu

Options on this menu are used to set the default date or item ranges of items displayed on the CPRS GUI Cover Sheet.

Option Text	Option Name	Description
GUI Cover Sheet Division Display Parameters	ORQ SEARCH RANGE	This option allows you to modify a <i>division's</i> default number of days to display on the cover sheet for Inpatient Lab Orders and Results, Outpatient Lab Orders and Results, Radiology Exams, Consult/Requests, Appt Start Dates, Appt Stop Dates, Visit Start Dates, Visit Stop Dates, and Clinical Reminders.
GUI Cover Sheet Location Display Parameters	ORQ SEARCH RANGE	This option allows you to modify a <i>location's</i> default number of days to display on the cover sheet for Inpatient Lab Orders and Results, Outpatient Lab Orders and Results, Radiology Exams, Consult/Requests, Appt Start Dates, Appt Stop Dates, Visit Start Dates, Visit Stop Dates, and Clinical Reminders.
GUI Cover Sheet Service Display Parameters	ORQ SEARCH RANGE SERVICE PARAM	This option allows you to modify a <i>service's</i> default number of days to display on the cover sheet for Inpatient Lab Orders and Results, Outpatient Lab Orders and Results, Radiology Exams, Consult/Requests, Appt Start Dates, Appt Stop Dates, Visit Start Dates, Visit Stop Dates, and Clinical Reminders.
GUI Cover Sheet System Display Parameters	ORQ SEARCH RANGE SYSTEM PARAM	This option allows you to modify the <i>system's</i> default number of days to display on the cover sheet for Inpatient Lab Orders and Results, Outpatient Lab Orders and Results, Radiology Exams, Consult/Requests, Appt Start Dates, Appt Stop Dates, Visit Start Dates, Visit Stop Dates, and Clinical Reminders.
GUI Cover Sheet User Display Parameters	ORQ SEARCH RANGE USER PARAM	This option allows a <i>user</i> to modify the default number of days to display on the cover sheet for Inpatient Lab Orders and Results, Outpatient Lab Orders and Results, Radiology Exams, Consult/Requests, Appt Start Dates, Appt Stop Dates, Visit Start Dates, Visit Stop Dates, and Clinical Reminders.

## GUI Cover Sheet User Display Parameters Example

This option allows you to modify the *user's* default number of days to display on the cover sheet for Inpatient Lab Orders and Results, Outpatient Lab Orders and Results, Appt Start and Stop Dates, Visit Start and Stop Dates, and Clinical Reminders.

All of the options on this menu are very similar to this example.

```
Select GUI Parameters Option: US  GUI Cover Sheet Display Parameters

  SY      GUI Cover Sheet System Display Parameters
  DI      GUI Cover Sheet Division Display Parameters
  SE      GUI Cover Sheet Service Display Parameters
  LO      GUI Cover Sheet Location Display Parameters
  US      GUI Cover Sheet User Display Parameters

Select GUI Cover Sheet Display Parameters Option: US  GUI Cover Sheet User
Display Parameters
Select NEW PERSON NAME: GREEN,JOANN          jg

GUI Cover Sheet - User for User: GREEN,JOANN
-----
Lab Order/Result Inpatient Date Range                60
Lab Order/Result Outpatient Date Range
Appt Search Start Date
Appt Search Stop Date
Visit Search Start Date
Visit Search Stop Date
Clinical Reminders for Search
-----
Inpatient Lab Number of Display Days: 60//
Outpatient Lab Number of Display Days: 120
Appt Search Start Date: T// T-30
Appt Search Stop Date: T+90// T+60
Visit Search Start Date:T-365// T-30
Visit Search Stop Date: T// T+60

For Clinical Reminders for Search -
Select Number: 10
Are you adding 10 as a new Number? Yes//   YES

Number: 10//<Enter>    10
Value: ?
  Answer with PCE REMINDER/MAINTENANCE ITEM NAME, or REMINDER TYPE, or
  PRINT NAME
  Do you want the entire 34-Entry PCE REMINDER/MAINTENANCE ITEM List? Y (Yes)
Choose from:
  VA-*BREAST CANCER SCREEN
  VA-*CERVICAL CANCER SCREEN
  VA-*CHOLESTEROL SCREEN (F)
  VA-*CHOLESTEROL SCREEN (M)
  VA-*COLORECTAL CANCER SCREEN (
  VA-*COLORECTAL CANCER SCREEN (
  VA-*FITNESS AND EXERCISE SCREE
  VA-*HYPERTENSION SCREEN
  VA-*INFLUENZA IMMUNIZATION
  VA-*PNEUMOCOCCAL VACCINE
  VA-*PROBLEM DRINKING SCREEN
  VA-*SEAT BELT AND ACCIDENT SCR
```

### *GUI Cover Sheet User Display Parameters, cont'd*

```
VA-*TETANUS DIPHTHERIA IMMUNIZA
VA-*TOBACCO USE SCREEN
VA-*WEIGHT AND NUTRITION SCREE
VA-ADVANCED DIRECTIVES EDUCATI
VA-ALCOHOL ABUSE EDUCATION
VA-BLOOD PRESSURE CHECK
VA-BREAST EXAM
VA-BREAST SELF EXAM EDUCATION
VA-DIGITAL RECTAL (PROSTATE) E
VA-EXERCISE EDUCATION
VA-FECAL OCCULT BLOOD TEST
VA-FLEXISIGMOIDOSCOPY
VA-INFLUENZA VACCINE
VA-MAMMOGRAM
VA-NUTRITION/OBESITY EDUCATION
VA-PAP SMEAR
VA-PNEUMOVAX
VA-PPD
VA-PSA
VA-SEAT BELT EDUCATION
VA-TOBACCO EDUCATION
VA-WEIGHT
```

Value: INFLUENZA ??

Value: **VA-INFLUENZA VACCINE**

For Clinical Reminders for Search -  
Select Number: **<Enter>**

## **GUI Health Summary Types**

Use this option to enter Health Summary types that may be displayed on the Reports screen. Include only health summaries that do no additional prompting, such as for time and occurrence limits; these must be already defined. Since the GUI can't drop into a character-based scrolling dialog, ad hoc health summaries are not allowed.

```
Select GUI Parameters Option: HS  GUI Health Summary Types

--- Setting Allowable Health Summary Types  for System: OEX.ISC-SLC.VA.GOV

Sequence: ?

Enter the sequence in which this health summary should appear in the list.
Select Sequence: 1
Sequence: 1//      1
Health Summary: GMTS HS EYE CLINIC
Select Sequence: <Enter>

   CS      GUI Cover Sheet Display Parameters ...
   HS      GUI Health Summary Types
   TM      GUI Tool Menu Items

Select GUI Parameters Option: <Enter>
```

## GUI Tool Menu Items

This option lets you add items that will appear on your Tools menu in the CPRS GUI. Items that appear on the tools menu should be Windows executable files. Enter them in this format: "Display Text=Executable."

For example, Vista Terminal Emulator=KEA.EXE VISTA.

```
Select GUI Parameters Option: tm  GUI Tool Menu Items

CPRS GUI Tools Menu may be set for the following:

    1  User          USR      [choose from NEW PERSON]
    2  Location      LOC      [choose from HOSPITAL LOCATION]
    3  Division      DIV      [REGION 5]
    4  System        SYS      [OEX.ISC-SLC.VA.GOV]

Enter selection: 1  User      NEW PERSON
Select NEW PERSON NAME:  GREEN,JOANN      jg

----- Setting CPRS GUI Tools Menu  for User: GREEN,JOANN -----
Sequence: ?

Enter the sequence in which this menu item should appear.
Select Sequence: 1
Are you adding 1 as a new Sequence? Yes// YES
Sequence: 2// <Enter>

Name=Command: ??

This parameter may be used to identify which items should appear on the
tools menu which is displayed by the CPRS GUI.  Each item should contain
a name that should be displayed on the menu, followed by an equal sign,
followed by the command string used to invoke the executable.  This
string may also include parameters that are passed to the executable.
Some example entries are:

    Hospital Policy=C:\WINNT\SYSTEM32\VIEWERS\QUIKVIEW.EXE LOCPLCY.DOC
    VISTA Terminal=C:\PROGRA~1\KEA\KEAVT.EXE VISTA.KTC

An ampersand may be used in the name portion to identify a letter that
should be underlined on the menu for quick keyboard access.  For example,
to underscore the letter H in Hospital Policy, enter &Hospital Policy as
the name part.

Name=Command:  c:\MSOFFICE\SWINWORD.EXE

Example:  Notepad=C:\WINDOWS\notepad.exe.

Name=Command:
```

## Adding an Add Orders Menu to the GUI

The parameters that control the "Write Orders" list are edited through the General Parameter Tools menu (XPAR MENU TOOLS).

### Using *General Parameter Tools* on the CPRS Configuration menu (IRM)

1. Use the *List Values for a Selected Parameter* option to see how the parameter for the write orders list is exported (the package level of the parameter ORWOR WRITE ORDERS LIST).
2. Use *Edit Parameter Values*, select ORWOR WRITE ORDERS LIST.
3. Select "System" to enter the dialogs and menus that you want to appear in the list at your site.

### Using Order Menu Management - *Enter/edit order menus* on the CPRS configuration menu (Clin Coord).

1. Create a new menu. Remember, this menu will be what shows up in the list box on the left side of the orders tab, so it should be a single column. You can put what you want in this list. The idea was that it would contain the most common ordering menus and dialogs to which a user needs access.
2. After creating the menu, use *Edit Parameter Values* and select ORWDX WRITE ORDERS LIST as the parameter.
3. Select "System" and enter the menu you just created as the value. You can override by exception what you set for the system level by setting the parameter for a particular division or user. The ORWDX WRITE ORDERS LIST parameter takes precedence over the ORWOR WRITE ORDERS LIST parameter, if both are present.

You can find what was on the "Write Orders" list to start with by using the parameter tools menu (XPAR MENU TOOLS), selecting List Values for a selected parameter, and entering ORWOR WRITE ORDERS LIST as the parameter. The exported list will be preceded by PKG. If the list has been modified at your site, each item will be preceded by SYS. If a list has been set up for a specific user, it will be preceded by USR.

The "Write Orders" list, as exported, contains the following dialogs:

Sequence	Value	Display Name
30	FHW1	Diet
52	PSJ OR PAT OE	Meds, Inpatient
55	PSO OERR	Meds, Outpatient
58	PSJI OR PAT FLUID OE	IV Fluids
60	LR OTHER LAB TESTS	Lab Tests
70	RA OERR EXAM	Radiology
80	GMROR CONSULT	Consult
85	GMROR REQUEST	Procedure
90	GMRVOR	Vitals
99	OR GXTEXT WORD PROCESSING ORDER	Text Only Order



The sequence is just an arbitrary number to indicate the order that the dialog should be in the list.

```
Select OPTION NAME: ORMGR          CPRS Manager Menu      menu

CL      Clinician Menu ...
NM      Nurse Menu ...
WC      Ward Clerk Menu ...
PE      CPRS Configuration (Clin Coord) ...
IR      CPRS Configuration (IRM) ...

Select CPRS Manager Menu Option: IR  CPRS Configuration (IRM)

OC      Order Check Expert System Main Menu ...
TI      ORMTIME Main Menu ...
UT      CPRS Clean-up Utilities ...
XX      General Parameter Tools ...

Select CPRS Configuration (IRM) Option: XX  General Parameter Tools

LV      List Values for a Selected Parameter
LE      List Values for a Selected Entity
LP      List Values for a Selected Package
LT      List Values for a Selected Template
EP      Edit Parameter Values
ET      Edit Parameter Values with Template

Select General Parameter Tools Option: EP  Edit Parameter Values
      --- Edit Parameter Values ---

Select PARAMETER DEFINITION NAME: ORWDX WRITE ORDERS LIST      Menu for Write
Orders List

ORWDX WRITE ORDERS LIST may be set for the following:

      2  User          USR      [choose from NEW PERSON]
      7  Division      DIV      [REGION 5]
      8  System        SYS      [OEX.ISC-SLC.VA.GOV]

Enter selection: 2 User      NEW PERSON
Select NEW PERSON NAME: GREEN,JOANN      jg

----- Setting ORWDX WRITE ORDERS LIST for User: GREEN,JOANN -----
Order Dialog: ??

Choose from:
FHWMENU
GMRVORMENU
OR ADD MENU CLINICIAN
OR GMENU ACTIVITY ORDERS
OR GMENU ORDER SETS
OR GMENU OTHER ORDERS
OR GMENU PATIENT CARE ORDERS
OR GXMOVE PATIENT MOVEMENT
ORZ WHATEVER
ZZCURTIS
ZZJFR MENU
ZZJFR TEST MENU
ZZKCM MENU
ZZKCM MENU 1
ZZMARCIA
ZZMEL MENU
ZZRV1

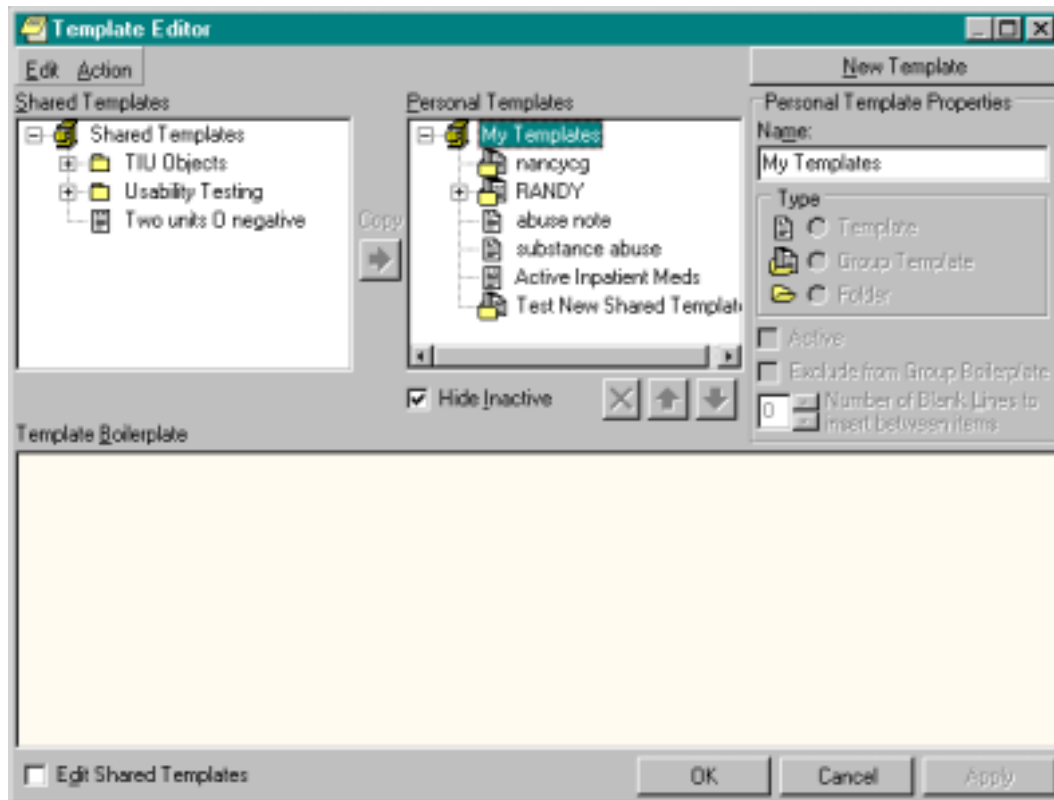
Order Dialog: ZZMEL MENU
```

## Document Templates

*(NOTE: This functionality becomes available with Version 12 of Patch 10.)*

Document templates let you quickly add commonly used text and TIU objects when writing or editing progress notes, completing consults, or writing discharge summaries.

The Template Editor, shown below, is used to set up personal, shared, and group templates. These types of templates are described in the following section.



**Personal templates.** Any user can create his or her own templates. You can copy and paste text into a template, type in new content, add TIU objects, or begin by copying a shared template and then modifying it as needed. Personal template and folder icons have a folded upper right corner.

**Shared templates.** Only members of the Clinical Coordinator ASU class can *create* shared templates. Shared templates are available to all users. Coordinators can copy and paste text into a template, type in new content, add TIU objects, or begin by copying a personal template and then modifying it as needed. In the tree view, shared template and folder icons do not have a folded corner.

☞ **NOTE:** When you install CPRS, a copy of all your existing boilerplate titles is placed in the inactive boilerplates folder under shared templates.

Clinical coordinators can arrange the boilerplate titles copied into the shared templates to be used as templates, use them to create new templates, or make them available to users by moving them out of the inactive folder. Users will not see the inactive folder or its contents unless you choose to make the folder active.

(To see the boilerplates folder, go into the templates editor, make sure Edit Shared Templates is checked, uncheck Hide Inactive under shared templates, and click the plus sign beside the shared icon.)

## **Types of Templates**

When you create templates, you can go directly into the template editor, type in text, and add TIU objects, or if you are in a document and type in something you will use repeatedly, you simply select that text, right-click, select Create New Template, and the editor comes up with the selected text in the editing area.

You can create individual templates, group templates, or folders.

*Templates* contain text and TIU objects that you can place in a document.

*Group templates* contain text and TIU objects and can also contain other templates. If you place a group template in a document, all text and objects in the group template and all the templates it contains (unless they are excluded from the group template) will be placed in the document. You can also expand the view of the group template and place the individual templates it contains in a document one at a time.

*Folders* are like folders or directories in a file system. They are used to group and organize templates. You cannot place a folder in a document. It is there to hold templates and help in navigating the template tree view. For example, you might create a folder called "radiology" for templates, group templates, and other folders relating to radiology.

## **Arranging Templates for Ease of Use**

How you arrange your templates depends on your specific needs. However, it may be useful to group similar templates together. You can also use folders to group similar templates, making them easier to find. This organization will be similar to a good directory structure for your workstation. For example, you may want to place all of the pulmonary templates together rather than alphabetizing templates.

By placing those templates together that you will use, you will spend less time moving around the tree to find the template you need.

## Using Templates to Create Documents

Once you have created templates, adding them to a document is easy. When you create a new note, a Templates button (also called a "drawer") appears. When you click the button, it opens to show you the templates that are available. Group templates and folders have a plus next to them. Click the plus to expand the tree view and see the templates they contain. Click a minus sign to collapse the tree view, hiding the templates under that item.

When you find the object you want to place in a document, you can drag-and-drop it into the document, double-click it, or right-click and choose Insert Template. The text and objects will appear where the cursor was a few seconds later.

## Searching for Templates

You can search for templates by the words in the template name. To search, right-click in the templates in the editor or in the templates "drawer" and choose Find Templates. A text field, Find button, and two find options check boxes appear. Enter the text you want to find and click Find.

## Creating Personal Document Templates

To create a personal document template, follow these steps:

1. On the Notes, Consults, or D/C Summ tab, bring up the Template Editor by selecting Options | Create New Template

-or-

To save specific text in a new note as a template, select the text, right-click on it, and select Copy into New Template.


2. In the Name field under Personal Template Properties, enter a name for the new template. Remember the template name requirements.
3. Click the template type: Template, Group Template, or Folder.
4. For Templates and Group Templates, enter the text and TIU objects (if desired) to create the content. you can enter content in these ways:

Copy and paste from other documents

Type in text

Insert TIU objects

Copy a shared template

 **NOTE:** After you enter the content, you can right-click in the Template Boilerplate area to select spell check or Check Boilerplate for Errors, which looks for invalid TIU objects.

5. Find where you want to place the template in the tree view.
  - a. Click the plus sign next to an item to see the objects under it.
  - b. Drag-and-drop the template where you want it in the tree. (Or use arrows below the personal templates tree view.)
6. To save the template, click Apply. To save and exit the editor, click OK.

### **Editing Document Templates**

You can change your personal templates and members of the Clinical Coordinator ASU class can change shared templates at any time.

To edit a document template, follow these steps:

1. Click the Notes, Consults, or D/C Summ tab.
2. Select Options | Edit Templates (Option | Edit Shard Templates to edit shared)

-or-

If the Templates drawer (Notes tab) is open, right-click in the drawer, and select Edit Templates.

3. Find the template you want to edit.
  - a. Click the plus sign next to an item to see the objects under it.
  - b. Click the template you want to edit.
4. Make any desired changes, like these:
  - Type in more text.
  - Add TIU objects.
  - Change the template name.
  - Move the template to a different location.
  - Make the template inactive if you don't want it seen in the template drawer.
  - If part of a group template, exclude it to make it not copy into a document when the group icon is dragged-and-dropped or double-clicked. Or, if excluded, you can click the check box to include it again.
  - Change the template type (template, group template)

☞ **NOTE:** If you change from a template or group template to a folder, you will lose the text in the template.

5. To spell check or Check Boilerplate for Errors, right-click in the Boilerplate Template area and select the appropriate option.
6. When finished, click Apply to save or click OK to save and exit the editor.

## Creating Shared Document Templates

To create shared document templates, you must be a belong to the Clinical Coordinator ASU class.

You can then create templates containing text and TIU objects that will be available to all users.

To create shared templates, follow these steps:

1. Click the Notes, Consults, or D/C Summary tab.
2. Select Options | Create New Shared Template to bring up the Template Editor.

A template called "New Template" is created under Shared Templates..

3. In the Name field under Shared Template Properties, enter a name for the new template. Remember the template name requirements.
4. Click the template type: Template, Group Template, or folder. If you choose Folder, skip to step 6.
5. For templates and Group Templates, enter the text and TIU objects (if desired) to create the content. you can enter content in these ways:

Copy and paste from other documents

- Type in text
- Insert TIU objects
- Copy one of your personal templates

☞ **NOTE:** After you enter the content, you can right-click in the Template Boilerplate area to select spell check or Check Boilerplate for Errors, which looks for invalid TIU objects.

6. Find where you want to place the template in the tree view.
  - a. Click the plus sign next to an item to see the objects under it.
  - b. Drag-and-drop the template where you want it in the tree. (Or use arrows below the personal templates tree view.)
7. To save the template, click Apply. To save and exit the editor, click OK.

☞ **NOTE:** You do not have to click Apply after each template, but it is recommended because if you click Cancel, you will lose all changes you have made since the last time you clicked Apply or OK.

## Copying Document Templates

Users can copy a shared template into their personal templates. Clinical Coordinators can copy personal templates into the shared templates also. In addition, you can also copy a template and paste it elsewhere in the same personal or shared tree (hierarchy). Instructions for copying templates within a tree

To copy a shared template into personal, use these steps:

1. Click the Notes, Consults, or D/C Summ tab.
2. Select Options | Edit Templates

-or-

If the Templates "drawer" (Notes tab) is open, right-click in the drawer, and select Edit Templates.

3. Expand the personal template tree to show find where you will paste the shared template.
  - a. Click the plus sign next to an item to see the objects under it.
  - b. Continue until you find the right location.
  - c. Click the template under which you want the shared template.
4. Find the shared template you want to copy.
  - a. In the shared templates, click the plus sign next to items to see the objects under them.
  - b. Click the template you want to copy.
5. Click the arrow button between the trees, double-click the shared template, or drag-and-drop the shared template to the chosen location.

☞ **NOTE:** At this point, the template is still a shared template. Changes to the original shared template will appear in your version also, which may be desirable. But if you change your version in any way, it becomes a personal template, the icon will have a folded corner and changes to the original will not affect your version.

6. To save the template, click Apply. To save and exit the editor, click OK.

## 5. Miscellaneous Parameters

This option is for editing miscellaneous hospital-wide CPRS parameters, such as the length of time orders are displayed as Active after they have been completed, what prompts to suppress, whether to display statuses, etc.

```

AL      Allocate OE/RR Security Keys
KK      Check for Multiple Keys
DC      Edit DC Reasons
GP      GUI Parameters ...
MI      Miscellaneous Parameters
NO      Notification Mgmt Menu ...
OC      Order Checking Mgmt Menu ...
MM      Order Menu Management ...
LI      Patient List Mgmt Menu ...
FP      Print Formats
PR      Print/Report Parameters ...
RE      Release/Cancel Delayed Orders
Select CPRS Configuration (Clin Coord) Option: mi  Miscellaneous Parameters

Miscellaneous OE/RR Definition for System: OEX.ISC-SLC.VA.GOV
-----
Active Orders Context Hours          1
Auto Unflag                          YES
Confirm Provider                     NO
Default Provider                     YES
DC Generic Orders on Admission       NO
DC Generic Orders on Transfer        SPECIALTY TRANSFER
Error Days                           30
Grace Days before Purge              90
Lapse Delayed Orders in #Days        180
New Orders Default                   Sign All Orders
Restrict Requestor                   NO
Review on Patient Movement           YES
Show Lab #                           YES
Show Status Description               YES
Signature Default Action              Release w/o Signature
Signed on Chart Default               NO
-----
ACTIVE ORDERS CONTEXT HOURS: 0// ??
This parameter defines the number of hours that orders remain in the
"Active/Current Orders" context after they have been completed.

ACTIVE ORDERS CONTEXT HOURS: 0// 2
AUTO UNFLAG: YES// ??
This parameter, when set to YES, will automatically cancel
the Flag Orders Notification and unflag all orders for a
patient when a user process a Flagged Orders Notification.

AUTO UNFLAG: YES// <Enter>
CONFIRM PROVIDER: NO// ??
This field will allow an additional prompt to confirm the provider
selection when adding new orders.
Entering 2 in this field will exclude holders of the ORES key
(providers) from this check.
Notice that these parameters also control the default presented to the user:
'Are you sure? <no -or- yes>'

```



### *Miscellaneous Parameters, cont'd*

CONFIRM PROVIDER: NO// ?

Enter YES to prompt the user for confirmation whenever a provider is entered.

Select one of the following:

- 0 NO
- 1 YES (Default NO)
- 2 YES (Exclude ORES)
- 3 YES (Default YES)

CONFIRM PROVIDER: NO// 2 YES (Exclude ORES)

DEFAULT PROVIDER: YES// ??

This parameter allows the attending physician to be prompted as a default when adding new orders.

DEFAULT PROVIDER: YES//<Enter>

DC GENERIC ORDERS ON ADMISSION: NO// ??

This parameter controls the DC'ing of generic orders (orders that are not transmitted to any ancillary service for action) when a patient is admitted. If set to YES, then generic orders are DC'd whenever a patient is admitted to the hospital; if empty or set to NO, no automatic DC'ing will take place on admission.

DC GENERIC ORDERS ON ADMISSION: NO// <Enter>

DC GENERIC ORDERS ON: SPECIALTY TRANSFER// ?

Select the type of transfer on which to DC a patient's generic orders.

Select one of the following:

- 0 NONE
- 1 WARD TRANSFER
- 2 SPECIALTY TRANSFER

DC GENERIC ORDERS ON: SPECIALTY TRANSFER// <Enter>

ERROR DAYS: 1// ?

This response must be a number.

ERROR DAYS: 1//<Enter>

GRACE DAYS BEFORE PURGE: 30//<Enter>

LAPSE DELAYED ORDERS IN #DAYS: 180// ??

This parameter sets a limit on the number of days that delayed orders may remain in the Orders file able to be released and activated. If a value is entered here, then any order awaiting release via an MAS event that has been in the Orders file more than the number days specified by this value will be set to a status of "lapsed" instead of released to the service for action. If no value is entered here, then the orders will be processed regardless of the length of time they have been in the file awaiting action.

LAPSE DELAYED ORDERS IN #DAYS: 180// <Enter>

NEW ORDERS DEFAULT: Sign All Orders// ??

This parameter determines the default action to be presented at the end of the Review New Orders screen; the action 'Next Screen' will be used until the last screen of orders, if there are more than one. If there is no action specified here, then 'Sign All Orders' will be used.

NEW ORDERS DEFAULT: Sign All Orders// <Enter>

RESTRICT REQUESTOR: YES (ORELSE & OREMAS)// ??

This field allows a site to restrict the selection of providers when adding new orders at the 'Requesting CLINICIAN: ' prompt for holders of the ORELSE and OREMAS key. The restriction being that they cannot select themselves as the requestor even though they may also hold the PROVIDER key.

- 1 YES (ORELSE) -restricts only holders of the ORELSE key.
- 2 YES (ORELSE & OREMAS) -restricts holders of either key.

RESTRICT REQUESTOR: YES (ORELSE & OREMAS)//<Enter>

### *Miscellaneous Parameters, cont'd*

REVIEW ORDERS ON PATIENT MOVEMENT: YES// ??

This parameter allows orders to be reviewed when a patient is transferred or discharged, and when a clinic appointment is made or canceled.

REVIEW ORDERS ON PATIENT MOVEMENT: YES//<Enter>

SHOW LAB #: NO// ??

This field controls the listing of lab orders for holders of the ORES key, after the electronic signature has been entered when entering new orders. Only after the order is released to Lab service is the number assigned; if physicians want to see the lab order # with the order after entering and signing the orders, this parameter must be set to YES. All other users get the listing regardless of what this parameter is set to.

SHOW LAB #: NO//<Enter>

SHOW STATUS DESCRIPTION: YES// ??

This parameter allows the description associated with a status to be displayed with the current status of an order when a detailed display is requested.

SHOW STATUS DESCRIPTION: YES// <Enter>

SIGNATURE DEFAULT ACTION: Release w/o Signature// ?

Enter the desired default signature action for ORELSE key holders.

Select one of the following:

OC	Signed on Chart
RS	Release w/o Signature

SIGNATURE DEFAULT ACTION: Release w/o Signature//<Enter>

SIGNED ON CHART DEFAULT: NO// ??

This defines the default value to be presented when the user gets the prompt to mark orders as Signed on Chart; if no value is entered, then NO is used as the default.

SIGNED ON CHART DEFAULT: NO// <Enter>

## 6. Notifications

### Overview

The Notifications component in CPRS generates clinical alerts regarding patient information from DHCP packages such as CPRS, Lab, Radiology, and Consults. A notification consists of one line of text that is displayed to the user at sign-on and option prompts.

```
TRAT,JACK (T2342): New order(s) placed.  
ANDERSON, (A3456): Order requires electronic signature.  
ABC,PATIE (A4321): Medication order(s) unverified by nurse.  
NIVEK,EPS (N4723): Medications nearing expiration.
```

Some notifications allow the user to perform a follow-up action to the notification. Notifications are deleted after being displayed and/or a follow-up action is taken. Sites have control over the use of CPRS Notifications at their Medical Centers. Kernel utilities handle the display, deletion, and follow-up actions for CPRS Notifications.

CPRS Notifications furnish providers with timely feedback regarding clinically relevant events. Some notifications allow the notification recipient to take direct follow-up action to the clinically relevant event.

The Team List utility (discussed in the next section) is used by the Notification utility to help identify potential notification recipients.

### Setup

To initiate notifications after the CPRS installation is complete, do the following steps:

- a. Enable Notifications, as needed by your site.** Notifications are exported as disabled to allow the conversions and install to run more rapidly. To enable Notifications, use the Notification Mgmt Menu for CPRS Mgr [ORB NOT MGR MENU] under the CPRS Configuration Menu (Clin Coord), then pick *Enable or Disable Notification System*. If your site is multidivisional, you can enable or disable the system for each division. If it isn't, or you want to enable for all divisions at once, select "System." For each division or the system enter "Enable" at the value prompt.

The new notifications that didn't exist in OE/RR 2.5 are exported as "disabled." This allows you to review and enable new notifications as needed by your site. Early installations of CPRS with all new notifications enabled tended to overwhelm users. Therefore, we recommend that you enable the new notifications for a few users at a time or a ward/clinic/service-section at a time.

**b. Use the options on the Notification Management Menu to control the way notifications work for individuals, departments/services, or the entire medical center.** (These options are described in following pages.)

**c. Edit Site Local Terms**

After CPRS installation, each site must run this option to link terms used in the expert system to local terms. Some terms like DNR and NPO diet must be mapped to one or more entries in the orderable item file. Other terms like Serum Creatinine must be mapped to the lab test file.

Nat'l Expert System Term	Linked File	Order Check
SERUM CREATININE	LAB [60]	AMINOGLYCOSIDE ORDERED
		BIOCHEM ABNORMALITY FOR CONTRAST MEDIA
		ESTIMATED CREATININE CLEARANCE
		RENAL FUNCTIONS OVER AGE 65
SERUM UREA NITROGEN	LAB [60]	AMINOGLYCOSIDE ORDERED
		BIOCHEM ABNORMALITY FOR CONTRAST MEDIA
		ESTIMATED CREATININE CLEARANCE
		RENAL FUNCTIONS OVER AGE 65
ANGIOGRAM,CATH – PERIPHERAL	OI [101.43]	MISSING LAB TESTS FOR ANGIOGRAM PROCEDUR
PROTHROMBIN TIME	OI [101.43]	MISSING LAB TESTS FOR ANGIOGRAM PROCEDUR
THROMBOPLASTIN TIME PARTIAL	OI [101.43]	MISSING LAB TESTS FOR ANGIOGRAM PROCEDUR
WHITE BLOOD COUNT (WBC)	LAB [60]	CLOZAPINE APPROPRIATENESS
BLOOD SPECIMEN	TOPOG [61]	CLOZAPINE APPROPRIATENESS
SERUM SPECIMEN	TOPOG [61]	AMINOGLYCOSIDE ORDERED
		BIOCHEM ABNORMALITY FOR CONTRAST MEDIA
		ESTIMATED CREATININE CLEARANCE
		RENAL FUNCTIONS OVER AGE 65

**Edit Site Local Terms Example**

```
Select Order Checking Mgmt Menu Option: 13  Edit Site Local Terms
Order Check National Terms
SERUM CREATININE
SERUM UREA NITROGEN
DNR
PROTHROMBIN TIME
NPO
SERUM SPECIMEN
PARTIAL THROMBOPLASTIN TIME
ANGIOGRAM (PERIPHERAL)
WBC
BLOOD SPECIMEN
< Enter ?? to see the rest of the national terms on this list>
```

### Edit Site Local Terms Example, cont'd

```
Select National Term: PROTHROMBIN TIME

National Term: PROTHROMBIN TIME

Translated from file: 'ORDERABLE ITEMS'  101.43

    PROTHROMBIN TIME      (2623)

Select ORDERABLE ITEMS NAME: PT
    1  PT      (2977)
    2  PT CONTROL      (2906)
    3  PT WITH MIX      (3391)
    4  PT. TEMP      (2645)
    5  PTH (C-TERMINAL)      (2790)
Press <RETURN> to see more, '^' to exit this list, OR
CHOOSE 1-5: 1  PT      (2977)
National Term: PROTHROMBIN TIME

    Translated from file: 'ORDERABLE ITEMS'  101.43

        PROTHROMBIN TIME      (2623)
        PT      (2977)

Select ORDERABLE ITEMS NAME: <Enter>
```

### Mail message sent after automatic recompiling

```
Subj: Order Check Compiler Status [#16691] 13 Jan 98 10:53  14 Lines
From: POSTMASTER (Sender: GREEN,JOANN) in 'IN' basket.  Page 1  **NEW**
-----

The Order Check routine compiler has completed normally
on JAN 13,1998 at 10:53 by [15] GREEN,JOANN.

    ORDER CHECK EXPERT version 1.0 (rev15) released DEC 15,1997 at 12:18

                Elapsed time: 6 minutes 50 seconds
                        Queued
    Execution Trace Mode:  ON
    Elapsed time Logging Mode:
    Raw Data Logging Mode:  ON  Keep data for 3 days then purge.
    Lines of code generated: 7835

Select MESSAGE Action: IGNORE (in IN basket)//
```

### Clean-up of OE/RR 2.5 Alerts

Some active notifications are converted to information-only alerts when CPRS 1.0 is installed, because CPRS no longer supports their follow-up action. The following alerts are converted:

- Lab Results
- Flagged Orders
- Order Requiring Electronic Signature (Unsigned Orders)
- Abnormal Lab Results
- Critical Lab Results
- Lab critical/abnormal/new result
- Unsigned Progress Notes
- Progress Notes Require Co-signature

## *Notifications, cont'd*

The following alerts are now handled by TIU functionality and are no longer triggered by CPRS:

- Unsigned Progress Note
- Progress Note Requires Co-signature

The following alerts are supported by CPRS and will not be converted:

- Radiology Results
- Abnormal Radiology Results
- Radiology Request Cancel/Held
- Consult/Request Cancel/Held
- New Service Consult/Request

☞ **NOTE:** Please notify your users that the above-mentioned alerts will be converted during install to make way for the new alerts and functionality of CPRS:

This is what the newly converted alerts will look like:

```
[CONV] OUTPATIENT (06641): Order requires electronic signature.
[CONV] AARON,OKP (A8900): LAB Critical GLUC.:NA:K:CA:PO4:URIC AC:...
[CONV] SO,PHILLI (S5293): Orders needing clarification.
```

## **Lab Alert Changes**

The lab series of alerts have been altered to work in conjunction as follows:

1. Users who work from lab results should have the Lab Results alert enabled and the Abnormal Lab Results alerts disabled.
2. Users (most clinicians) should enable one of the Abnormal Lab Results alerts and disable the Lab Results alert.
3. The Critical Lab Results alert [Info] is usually mandatory and sent to everyone linked to the patient or the order.
4. Abnormal Lab Results [Action], Critical Lab Result [Action], and Lab Results have follow-up actions that show the results of the order for abnormal/critical tests and normal tests. For most users, they should have one of these alerts enabled but not both.
5. Abnormal Lab Result [Info] and Critical Lab Result [Info] display the result and collection date/time in the message and have no follow-up.

With these alerts, users can get alerts for all or abnormal lab results, then see the actual results of the order via follow-up action. To supplement this, critical lab results are displayed.

## ***Notifications, cont'd***

### **Notification Processing**

A particular notification can be enabled (set to “Mandatory”) or disabled by Users, Clinical Coordinators, or IRMS staff. Clinical Coordinators or IRMS staff can make a notification mandatory by setting its value to “Mandatory.” This is accomplished by using options on the Notifications Management Menus. For example, the notification LAB RESULTS is exported as “disabled.” A site may want to “enable” this notification. Once enabled, the LAB RESULTS notification will be sent to all appropriate users. Notifications are deleted after being selected in the VIEW ALERTS option and/or a follow-up action is taken.

### **Notifications recipients**

- Ordering clinician/provider
- Members of a defined team related to the ordering clinician/ provider (Order Requires Electronic Signature and Order Requires Co-Signature notifications only)
- Providers with the notification patient on one or more of their patient lists (personal or team)
- Patient’s attending physician
- Patient’s primary provider

### **When Notifications can be seen**

- When you sign onto the system.
- After you reach a menu display and are prompted to “Select OPTION:” This includes notifications occurring since the last time you were at a “Select OPTION” prompt.
- If you select “VIEW ALERTS” at any “Select OPTION” prompt.
- In Windows (GUI) when you select a new patient.

### **Notification Actions**

- Some Notifications are information-only and disappear after you select them.
- Other Notifications require a follow-up action before they are removed. The follow-up action takes you to a screen to perform the desired action.
- To review notifications and/or take follow-up action, select the VIEW ALERTS option, and enter the number(s) of the notification(s) you wish to process. You can also enter the following:
  - A to process all of the pending alerts in the order shown.
  - I to process all of the INFORMATION ONLY alerts, if any
  - P to print a copy of the pending alerts on a printer
  - M to receive a MailMan message containing a copy of these pending alerts
  - F to Forward alerts
  - R to Redisplay the available alerts
  - ^ to exit

## Notification Management Menu

Option	Description
1. Enable/Disable Notifications	Turns notifications on or off for a user, team, location, service, divisions, or system.
2. Erase Notifications	This option lets you erase all notifications for a user, patient or a specific notification.
3. Set Urgency for Notifications (GUI)	This option lets you set the urgency for a notification to high, moderate, or low.
4. Set Deletion Parameters for Notifications	This option lets you specify under what circumstances a notification is deleted after a review action.
5. Set Default Recipient(s) for Notifications	This option lets you specify whether a notification is sent to a user or a team.
6. Set Default Recipient Device(s) for Notifications	This option lets you specify whether division and system devices receive notifications.
7. Set Provider Recipients for Notifications	This option lets you specify which providers receive notifications on a patient.
8. Flag Orderable Item(s) to Send Notifications	This option contains two sub-options to flag specific orderable items to send notifications when they are ordered, resulted, or expiring.
9. Archive(delete) after <x> Days	This option sets the number of days to save notifications after action is taken on them.
10. Forward Notifications ... <ul style="list-style-type: none"> <li>Forward Unprocessed Notification to Supervisor</li> <li>Forward Unprocessed Notification to Surrogates</li> </ul>	These options let you specify a number of days a notification waits without action before forwarding it to the supervisor or the mailman surrogate.
11. Set Delays for Unverified Orders ... <ul style="list-style-type: none"> <li>Set Delay for All Unverified Orders</li> <li>Set Delay for Unverified Medication Orders</li> </ul>	Enter the number of hours' delay to wait after an order is placed before triggering an Unverified Order or Unverified Medication Order notification/ alert. The maximum number of hours is 10,000.
12. Set Notification Display Sort Method (GUI)	This option lets you specify the GUI display order for user, division, and system.
13. Send Flagged Orders Bulletin	This option lets you specify if a bulletin is sent when an order is flagged for clarification.
14. Determine Recipients for a Notification	Debugging tool to determine if and why a user receives a notification.
15. Display Patient Alerts and Alert Recipients	This option lets you see all Kernel Alerts for a patient or recipients of selected alerts along with relevant data. This option uses the Alert Tracking file [^XTV(8992.1)].
16. Enable or Disable Notification System	This option determines if any notification processing will occur in the entire Notifications system. Can be set at the Institution or System level.
17. Display the Notifications a User Can Receive	This option prompts for a user/recipient then processes each notification to determine if and why the user will receive the notification. This information is then displayed.
18. Set Surrogate Notification Recipient for a User	This option lets you set up a surrogate to receive all notifications for a user.



## Notifications Management Menu Option Descriptions

### Enable/Disable Notifications [ORB3 PROCESSING FLAG]

This option allows a coordinator or user to turn specific notifications on or off.

E (Enabled): notification enabled for entity unless entity of higher precedence has notification disabled (e.g. Enabled at System level and Disabled at User level - User will not receive notification.)

D (Disabled): notification disabled for entity unless entity of higher precedence has notification enabled (see the Recipient Matrix) (e.g. Disabled at System level and Enabled at User level - User will receive notification.)

☞ **NOTE:** If a coordinator or IRMS person has answered “Yes” in the option *Set Default Recipients for Notification*, indicating that the user should *always* receive the notification, that Team or User will always receive the notification, regardless of the Enabled/Disabled settings.

### Enable/Disable Notifications Example

```
Select Notification Mgmt Menu Option: 1  Enable/Disable Notifications

                                Set PROCESSING FLAG Parameters for Notifications
-----
may be set for the following:
  1  User          USR      [choose from NEW PERSON]
  2  Team          TEA      [choose from TEAM]
  3  Service        SRV      [choose from SERVICE/SECTION]
  4  Location        LOC      [choose from HOSPITAL LOCATION]
  5  Division        DIV      [REGION 5]
  6  System          SYS      [OEX.ISC-SLC.VA.GOV]

Enter selection: 1  User      NEW PERSON
Select NEW PERSON NAME:      MALMROSE,CARY          DM          Father John

----- Setting      for User: MALMROSE,CARY -----
Select Notification: ??
      Notification          Value
      -----
      ORDER REQUIRES ELEC SIGNATURE Enabled

Answer with OE/RR NOTIFICATIONS NUMBER, or NAME, or PACKAGE ID, or
      MESSAGE TEXT, or RECIPIENT USERS

Do you want the entire 47-Entry OE/RR NOTIFICATIONS List? y  (Yes)
Choose from:
  3          LAB RESULTS
  5          ORDER REQUIRES CHART SIGNATURE
  6          FLAG ORDER FOR CLARIFICATION
  12         ORDER REQUIRES ELEC SIGNATURE
  14         ABNORMAL LAB RESULTS (ACTION)
  18         ADMISSION
  19         UNSCHEDULED VISIT
  20         DECEASED PATIENT
  21         IMAGING PATIENT EXAMINED
  22         IMAGING RESULTS
  23         CONSULT/REQUEST RESOLUTION
  24         CRITICAL LAB RESULT (INFO)
  25         ABNORMAL IMAGING RESULTS
  26         IMAGING REQUEST CANCEL/HELD
```

```

27      NEW SERVICE CONSULT/REQUEST
28      SERVICE ORDER REQ CHART SIGN
30      CONSULT/REQUEST CANCEL/HOLD
31      NPO DIET MORE THAN 72 HRS
32      FLAGGED OI RESULTS - INPT
33      ORDERER-FLAGGED RESULTS
35      DISCHARGE
36      TRANSFER FROM PSYCHIATRY
37      ORDER REQUIRES CO-SIGNATURE
41      FLAGGED OI ORDER - INPT
42      LAB ORDER CANCELED
43      STAT ORDER
44      STAT RESULTS
45      DNR EXPIRING
46      FREE TEXT
47      MEDICATIONS EXPIRING
48      UNVERIFIED MEDICATION ORDER
50      NEW ORDER
51      STAT IMAGING REQUEST
52      URGENT IMAGING REQUEST
53      IMAGING RESULTS AMENDED
54      ORDER CHECK
55      FOOD/DRUG INTERACTION
56      ERROR MESSAGE
57      CRITICAL LAB RESULTS (ACTION)
58      ABNORMAL LAB RESULT (INFO)
59      UNVERIFIED ORDER
60      FLAGGED OI RESULTS - OUTPT
61      FLAGGED OI ORDER - OUTPT
62      DC ORDER
63      CONSULT/REQUEST UPDATED
64      FLAGGED OI EXPIRING - INPT
65      FLAGGED OI EXPIRING - OUTPT
Notification: STAT RESULTS// <Enter>  STAT RESULTS  STAT RESULTS
Value: ?
Code indicating processing flag for the entity and notification.
Select one of the following:
      M      Mandatory
      E      Enabled
      D      Disabled
Value: e  Enabled

```

### ***Disabling a Notification***

Disabling a notification follows the same process, but it seems counter-intuitive. When the program asks if you want to add a new Notification, logically you'd want to say "No," but the program is really asking if you want to add a new notification to a temporary list for consideration about enabling or disabling. The program is using a generic FileMan call—we hope that in the near future a more user-friendly utility will be written for this option.

```

Select Notification Mgmt Menu Option: 1  Enable/Disable Notifications

      Set PROCESSING FLAG Parameters for Notifications

Processing Flag may be set for the following:
  1  User      USR      [choose from NEW PERSON]
  2  Team (OE/RR)  OTL      [choose from OE/RR LIST]
  3  Service    SRV      [choose from SERVICE/SECTION]
  4  Location    LOC      [choose from HOSPITAL LOCATION]
  5  Division    DIV      [REGION 5]
  6  System      SYS      [OEX.ISC-SLC.VA.GOV]
  7  Package     PKG      [ORDER ENTRY/RESULTS REPORTING]

```

## Notifications, cont'd

```
Enter selection: 1  User    NEW PERSON
Select NEW PERSON NAME:  GREEN,JOANN      jg

----- Setting Processing Flag  for User: GREEN,JOANN -----
Select Notification: ?

      Notification                                Value
      -----                                -
LAB RESULTS                                Disabled
ORDER REQUIRES ELEC SIGNATURE Mandatory
CRITICAL LAB RESULT (INFO)  Mandatory
STAT RESULTS                Mandatory
FREE TEXT                   Disabled

Answer with OE/RR NOTIFICATIONS NUMBER, or NAME, or PACKAGE ID, or
MESSAGE TEXT, or RECIPIENT USERS
Do you want the entire 41-Entry OE/RR NOTIFICATIONS List? N (NO)

Select Notification: ADMISSION
Are you adding ADMISSION as a new Notification? Yes// <Enter>   YES

Notification: ADMISSION// <Enter>    ADMISSION    ADMISSION

Value: Disabled
Select Notification: <Enter>
```

### Erase Notifications [ORB3 ERASE NOTIFICATIONS]

This option allows you to do one of the following:

1. Erase all notifications for a User
2. Erase all notifications for a Patient
3. Erase all instances of a notification (regardless of Patient or User)

### Set Urgency for Notifications (GUI) [ORB3 URGENCY]

This option lets you set the Urgency for a notification. The urgency is mainly used for sorting in GUI displays. The Urgencies include:

- 1 (High): notification is Highly urgent.
- 2 (Moderate): notification is Moderately urgent.
- 3 (Low): notification is of Low urgency.

### Set Deletion Parameters for Notifications [ORB3 DELETE MECHANISM]

This option lets you set parameters to determine deletion conditions.

It uses a set of codes to determine how a notification will be deleted at a site. The codes include:

- I** (Individual Recipient): delete the notification for an individual recipient when:
  - a) that individual completes the follow-up action on notifications with associated follow-up action.
  - b) that individual reviews notifications without follow-up actions.

## *Notifications, cont'd*

**A (All Recipients):** delete the notification for all recipients when:

- a) any recipient completes the follow-up action on notifications with follow-up actions.
- b) any recipient reviews notifications without follow-up actions.

### **Set Default Recipient(s) for Notifications [ORB3 DEFAULT RECIPIENTS]**

Enter “Yes” if the recipient should always receive this notification. Recipients (users, teams) will receive the notification on a regular basis—despite settings in the option Enable/Disable Notifications. These recipients will always receive the notification, regardless of patient.

### **Set Default Recipient Device(s) for Notifications [ORB3 DEFAULT DEVICE RECIPIENTS]**

Enter “Yes” if the device (from the Device file) should always receive this notification. Recipient devices will receive the notification on a regular basis—despite settings in the option Enable/Disable Notifications. These recipient devices will always receive the notification, regardless of patient.

### **Set Provider Recipients for Notifications [ORB3 PROVIDER RECIPIENTS]**

This option lets you set any one or combination of a set of codes indicating default [provider] recipients of a notification by their title or relationship to the patient. Notifications can be set up with any or all of the following codes:

- P** (Primary Provider): deliver notification to the patient’s Inpatient Primary Provider.
- A** (Attending Physician): deliver notification to the patient's Attending Physician
- T** (Patient Care Team): deliver notification to the patient's primary care Team.
- O** (Ordering Provider): deliver notification to the provider who placed the order that triggered the notification.

The providers, physicians, and teams must be set up properly and accurately for the correct individuals to receive the notification.

## *Notifications, cont'd*

### **Flag Orderable Item(s) to Send Notifications [ORB3 FLAG ORDERABLE ITEMS]**

This option has two sub-options to flag specific orderable items to send notifications when they are ordered, resulted, or expiring.

### **Archive(delete) after <x> Days [ORB3 ARCHIVE PERIOD]**

Enter the number of days to archive this notification before deletion in the Alert Tracking file. If not indicated, the default period of 30 days is used. The maximum number of days is 100,000 or about 220 years. This value is passed to the Kernel Alert Utility where the actual archiving and deletion of alerts/notifications occurs.

### **Forward Unprocessed Notification to Supervisor [ORB3 FORWARD SUPERVISOR]**

This option lets you set the number of days to hold a notification before forwarding it to the recipient's supervisor. The maximum is 30 days. If not indicated or zero, the notification will not be forwarded. For example, if a notification has a value of 14 for this option, it will be forwarded to the supervisor of each recipient who hasn't processed the notification after 14 days. Determination of recipients who have not processed the notification and who their supervisors are is made by the Kernel Alert Utility. Kernel identifies the supervisor as the service chief of the user's service. The notification will not be forwarded to supervisors of recipients who have processed the alert within 14 days. If the value of this option is zero or non-existent, the alert/notification will never be forwarded. Forwarding of unprocessed alerts is triggered by the option XQALERT DELETE OLD. This option is a Kernel option that should be tasked to run periodically. In addition to forwarding alerts, it cleans up old alerts greater than 14 days old.

### **Forward Unprocessed Notification to Surrogates [ORB3 FORWARD SURROGATES]**

This option lets you set the number of days before a notification is forwarded to a recipient's Mailman surrogates. The maximum is 30 days. If not indicated or zero, the notification will not be forwarded. For example, if a notification has a value of 14 for this option, it will be forwarded to the Mailman surrogates of each recipient who hasn't processed the notification after 14 days.

The Kernel Alert Utility determines recipients who have not processed the notification and their Mailman surrogates. If the value of this option is zero or non-existent, the alert/notification will never be forwarded. Forwarding of unprocessed alerts is triggered by the option XQALERT DELETE OLD, a Kernel option that should be tasked to run periodically. In addition to forwarding alerts, it cleans up old alerts greater than 14 days old.

## *Notifications, cont'd*

### **Example of forwarded alerts:**

1. HOOD,ROBI (H2591): New order(s) placed.  
Forwarded by: ANDERSON,CURTIS Generated: 07/02/97 16:26:36  
ALERT NOT PROCESSED BY ANDERSON,CURTIS
2. FEET,SMEL (F1990): New order(s) placed.  
Forwarded by: ANDERSON,CURTIS Generated: 07/02/97 14:40:32  
ALERT NOT PROCESSED BY ANDERSON,CURTIS

For this notification to work, a link must exist between the term DNR used by the CPRS expert system and each site's local term used to denote DNR. After CPRS installation, each site must run the option OCX NATIONAL TERM EDIT (on the CPRS Configuration Menu (IRM). This option links terms used in the expert system to local terms. Some terms like DNR and NPO diet must be mapped to one or more entries in the orderable item file. Other terms like Serum Creatinine must be mapped to the lab test file.

### **Set Delays for Unverified Orders [ORB3 UNVERIFIED ORDERS MENU]**

This menu provides access to options that set up parameters for delaying unverified orders alert triggers.

#### **Set Delay for All Unverified Orders [ORB3 UNVERIFIED ORDER]**

This option lets you enter the number of hours delay to wait after an order is placed before triggering an Unverified Order notification/alert. The maximum number of hours is 10,000.

#### **Set Delay for Unverified Medication Orders [ORB3 UNVERIFIED MED ORDER]**

This option lets you enter the number of hours delay to wait after a medication order is placed before triggering an Unverified Medication Order notification/alert. The maximum number of hours is 10,000.

#### **Set Notification Display Sort Method (GUI) [ORB3 SORT METHOD]**

This option lets you determine the order in which items of a notification are displayed in the GUI. The items include: by Patient, by Type (Notification name), and by Urgency. Within these sort methods notifications are presented in reverse chronological order.

#### **Send Flagged Orders Bulletin [ORB3 FLAGGED ORDERS BULLETIN]**

This option lets you indicate whether to send a bulletin when an order is flagged for clarification. "Yes" indicates a MailMan bulletin will be sent to the order's Current Provider (usually the Ordering Provider). This option has no effect on the Flagged Orders notification which is also triggered when an order is flagged for clarification.

## Notifications, cont'd

### Determine Recipients for a Notification [ORB3 DETERMINE RECIPIENTS]

This option lets you create a simulated notification recipient list, without sending the alert. You are prompted for information about recipients: patient, and notification, with the option to enter an order number and/or a recipient. Output can be directed to a device. This option is intended to serve as a tool to help determine why a user did or did not receive a particular notification. Please note: if team lists, patient-provider relationships (e.g. Attending and Primary), and/or parameter values have changed between the moment when the original notification was triggered and when this option is triggered, the outcome of the recipient list may be different.

### Display Patient Alerts and Alert recipients [ORB3 ALERT RECIPIENTS]

This option produces a list of all OE/RR alerts for a specified patient for the dates you enter. You can also get a detailed listing on specific alerts attached to the patient record. The detailed report shows each recipient and gives dates and times of key actions concerning the alert (such as 1<sup>st</sup> displayed, processed, deleted, etc.)

In the following example, the alerts are listed for a specific patient and details are listed on one of the alerts. The order number, if it exists, (and sometimes other information) is included in brackets after the alert name. This information is here for troubleshooting purposes.

### Display Patient Alerts and Alert recipients example

```
Select Notification Mgmt Menu Option: 15  Display Patient Alerts and Alert Recip
ients
PATIENT (req'd): doe,WILLIAM C          9-12-44    243236572    YES    SC VETE
RAN
  Enrollment Priority: GROUP 1    Category: IN PROCESS    End Date:

Start Date/Time (req'd): T-30//  (JUL 22, 2000)
End Date/Time (req'd): NOW//  (AUG 21, 2000@14:27)

Processing.....

          ALERTS FOR PATIENT: DOE,WILLIAM C

1  [2B M] WARFARIN TAB ordered - adjust diet according      8/18/00@15:51
2  [2B M] New order(s) placed. [7094486]                    8/18/00@10:00
3  [2B M] New order(s) placed. [7095466]                    8/18/00@09:45
4  Lab order canceled: POTASSIUM BLOOD  SERUM LC LB # [70954648/18/00@09:42
5  Lab order canceled: POTASSIUM BLOOD  SERUM LC LB # [70954628/18/00@09:42
6  Lab order canceled: POTASSIUM BLOOD  SERUM LC LB # [70954638/18/00@09:42
7  Lab order canceled: POTASSIUM BLOOD  SERUM LC LB # [70954618/18/00@09:41
8  Lab order canceled: POTASSIUM BLOOD  SERUM LC LB # [70954608/18/00@09:41
9  Lab order canceled: POTASSIUM BLOOD  SERUM WC LB # [70954588/18/00@09:41
10 Lab order canceled: POTASSIUM BLOOD  SERUM WC LB # [70954598/18/00@09:41
11 [2B MED] New DC order(s) placed. [7095457]                8/18/00@09:41
999 MORE...

Enter alerts to display in detail:
```

## Notifications, cont'd

```
BUECHLER,MELANIE
  1st displayed to recipient:
  1st selected by recipient:
  Processed by recipient:
  Deleted via follow-up:
  Auto deleted:
  Forwarded by:
Press RETURN to continue or '^' to exit:

RECIPIENTS OF ALERTS FOR PATIENT: DOE,WILLIAM C.   Page:    2

  Forwarded to recipient:

RUSSELL,JOEL
  1st displayed to recipient: Nov 18, 1997@11:47:53
  1st selected by recipient:
  Processed by recipient:
  Deleted via follow-up:
  Auto deleted:
  Forwarded by:
  Forwarded to recipient:

- End of Report -
Press RETURN to continue:
Select Notification Mgmt Menu Option:
```

### Enable or Disable Notification System [ORB3 ENABLE/DISABLE ]

This option turns on or off the entire Notifications system for a medical center.

### Display the Notifications a User Can Receive [ORB3 RECIP NOTIFICATIONS]

This is a debugging tool to help determine why (or why not) notifications are being received by a particular individual. It lists each notification and its processing flag. It also lists the reason for the processing flag value.

\*OERR is the exported value for a parameter. It can't be altered at a site.

### Example

```
Select Notification Mgmt Menu for OE/RR Mgr Option: 17  Display the
Notifications a User Can Receive
Enter user's name: ROBINSON, TOM//<Enter>

Would you like help understanding the list of notifications? No//<Enter>(No)

This will take a moment or two, please stand by.....
DEVICE: HOME//<Enter>    ALPHA
```



## Notifications, cont'd

### Example Notifications List

Notification List for ROBINSON,TOM		Page: 1
Notification	ON/OFF	For This User and Why
ABNORMAL IMAGING RESULTS	ON	OERR value is Mandatory
ABNORMAL LAB RESULT (INFO)	OFF	User's service MEDICINE value is Disabled
ABNORMAL LAB RESULTS (ACTION)	OFF	OERR value is Disabled
ADMISSION	ON	OERR value is Enabled
CONSULT/REQUEST CANCEL/HOLD	ON	OERR value is Enabled
CONSULT/REQUEST RESOLUTION	ON	OERR value is Enabled
CONSULT/REQUEST UPDATED	OFF	OERR value is Disabled
CRITICAL LAB RESULT (INFO)	ON	OERR value is Mandatory
CRITICAL LAB RESULTS (ACTION)	ON	OERR value is Mandatory
DC ORDER	OFF	OERR value is Disabled
DECEASED PATIENT	ON	OERR value is Enabled
DISCHARGE	OFF	OERR value is Disabled
DNR EXPIRING	OFF	OERR value is Disabled
ERROR MESSAGE	OFF	User's service MEDICINE value is Disabled
FLAG ORDER FOR CLARIFICATION	ON	OERR value is Enabled
FLAGGED OI EXPIRING - INPT	OFF	OERR value is Disabled
FLAGGED OI EXPIRING - OUTPT	OFF	OERR value is Disabled
FLAGGED OI ORDER - INPT	OFF	OERR value is Disabled
FLAGGED OI ORDER - OUTPT	ON	System value is Enabled
FLAGGED OI RESULTS - INPT	OFF	OERR value is Disabled
FLAGGED OI RESULTS - OUTPT	OFF	OERR value is Disabled
FOOD/DRUG INTERACTION	OFF	OERR value is Disabled
FREE TEXT	OFF	OERR value is Disabled
IMAGING PATIENT EXAMINED	ON	OERR value is Enabled
IMAGING REQUEST CANCEL/HELD	ON	OERR value is Enabled
IMAGING RESULTS	ON	OERR value is Enabled
IMAGING RESULTS AMENDED	OFF	OERR value is Disabled
LAB ORDER CANCELED	OFF	OERR value is Disabled
LAB RESULTS	OFF	OERR value is Disabled
MEDICATIONS EXPIRING	OFF	OERR value is Disabled
NEW ORDER	ON	Division ISC SALT LAKE value is Mandatory
NEW SERVICE CONSULT/REQUEST	ON	OERR value is Enabled
NPO DIET MORE THAN 72 HRS	OFF	OERR value is Disabled
ORDER CHECK	OFF	OERR value is Disabled
ORDER REQUIRES CHART SIGNATURE	ON	OERR value is Mandatory
ORDER REQUIRES CO-SIGNATURE	OFF	OERR value is Disabled
ORDER REQUIRES ELEC SIGNATURE	ON	Division ISC SALT LAKE value is Mandatory
ORDERER-FLAGGED RESULTS	OFF	OERR value is Disabled
SERVICE ORDER REQ CHART SIGN	ON	OERR value is Mandatory
STAT IMAGING REQUEST	OFF	OERR value is Disabled
STAT ORDER	OFF	OERR value is Disabled
STAT RESULTS	OFF	OERR value is Disabled
TRANSFER FROM PSYCHIATRY	OFF	OERR value is Disabled
UNSCHEDULED VISIT	ON	OERR value is Enabled
UNVERIFIED MEDICATION ORDER	OFF	OERR value is Disabled
UNVERIFIED ORDER	OFF	OERR value is Disabled
URGENT IMAGING REQUEST	OFF	OERR value is Disabled
- End of Report -		

### *Notifications, cont'd*

#### **Explanations of ON/OFF For This User and Why**

Reason	Explanation
Division/System value is Mandatory	The site determined that the notification is mandatory for either a division or a hospital.
OERR value is Mandatory	The notification is exported as mandatory.
OERR value is Disabled	The notification is exported as disabled by CPRS.
No Disabled values found	This notification is enabled since no one (a manager, coordinator, or user) has disabled it.
User value is Enabled	A manager, coordinator, or user has enabled this notification for this user.
User value is Disabled	A manager, coordinator, or user has disabled this notification for this user.
Division value is Disabled	A manager or coordinator has disabled this notification for the division.
System value is Disabled	A manager or coordinator has disabled this notification for the system.

#### **Set Surrogate Notification Recipient for a User [ORB3 SET SURROGATE RECIPIENT]**

This option sets up a surrogate to receive all notifications (OE/RR alerts) for a user.

Select Notification Mgmt Menu Option: **Set Surrogate Notification Recipient for a User**

Current Recipient:     **ANDERSON, CURTIS**                   CLA                   PHYSICIAN

----- Setting -----  
Surrogate Recipient: **green, JOANN**                   jg  
Sending bulletin to GREEN, JOANN...

Subj: Surrogate Recipient for OE/RR Notifications/Alerts [#16738]  
13 Jan 98 16:16 2 Lines  
From: GREEN, JOANN in 'IN' basket.   Page 1   \*\*NEW\*\*

-----  
You have been designated as the surrogate to receive  
OE/RR Notifications/Alerts for ANDERSON, CURTIS.

Select MESSAGE Action: IGNORE (in IN basket)//

## 7. Order Checking

Order checking, a component of order entry, is based on a system of rules, which review orders to see if they meet defined criteria. If they meet the criteria, an electronic message is sent to the ordering provider before the order is completed (such as duplicate order, drug-lab interaction, etc.). The provider can then choose to cancel the order or override the order check and place the order.

☞ **NOTE:** All order checks are exported disabled at the system level. When IRMS turns them on at the system level, they are then turned on for everyone. IRMS, Clinical Coordinators, individuals, or services can then disable individual order checks if they choose to.

**IMPORTANT:** If your site doesn't want individuals to be able to disable order checks, consider not assigning users the option *Enable/Disable Order Checks*.

### Relationship of Order Checking to Notifications

Order Checks are similar to Notifications in that both review existing data and current events to produce a relevant message that is presented to patient care-givers. Also, both systems use the CPRS expert system (OCX namespace), to define logical expressions for this evaluation and message creation. In addition to the expert system, both systems have some hard-coded algorithms. For example, the critical drug interaction order check is made via an entry point in the pharmacy package whereas renal functions for patients over 65 is defined as a rule in the CPRS expert system.

The main difference between the two systems is their focus. Order Checks are a real-time process that occurs during the ordering session and are driven by responses entered by the ordering provider. Order Check messages are displayed interactively in the ordering session. In contrast, Notifications occur behinds the scenes, monitoring data as it flows through DHCP and when certain trigger events occur.

## *Order Checking, cont'd*

### **How does Order Checking work?**


Order Checking performs checks while ordering is taking place.

Before orders go to services such as Lab and Pharmacy, they are sent to Order Checking where the ordered item is evaluated by an expert system rule against data from patient files. If one or more of the designated rules of logic for that type of order is met, order check messages are presented to the clinician placing the order.

### **Order checks exported with CPRS**

- ALLERGY-CONTRAST MEDIA INTERACTION
- ALLERGY-DRUG INTERACTION
- AMINOGLYCOSIDE ORDERED
- BIOCHEM ABNORMALITY FOR CONTRAST MEDIA
- CLOZAPINE APPROPRIATENESS
- CRITICAL DRUG INTERACTION
- CT & MRI PHYSICAL LIMITATIONS
- DISPENSE DRUG NOT SELECTED
- DUPLICATE DRUG CLASS ORDER
- DUPLICATE DRUG ORDER
- DUPLICATE ORDER (Non-Med)
- ERROR MESSAGE
- ESTIMATED CREATININE CLEARANCE
- GLUCOPHAGE-CONTRAST MEDIA
- LAB ORDER FREQ RESTRICTIONS
- MISSING LAB TESTS FOR ANGIOGRAM PROCEDURE
- ORDER CHECKING NOT AVAILABLE
- POLYPHARMACY
- RECENT BARIUM STUDY
- RECENT ORAL CHOLECYSTOGRAM
- RENAL FUNCTIONS OVER AGE 65
- SIGNIFICANT DRUG INTERACTION


**Note:** The DRUG-DRUG INTERACTION order check has been renamed CRITICAL DRUG INTERACTION. All parameter values associated with DRUG-DRUG are now associated with CRITICAL DRUG INTERACTION. A new order check, SIGNIFICANT DRUG INTERACTION, has been added to the Order Check File ([#100.8]). The exported, package-level parameter values for this new order check are ORK PROCESSING FLAG = "Enabled" and ORK CLINICAL DANGER LEVEL = "Moderate". The new order check lets sites designate significant drug interaction with a lower clinical danger level.

 **REMEMBER:** All of these order checks are exported disabled at the system level. When IRMS turns them on at the system level, they are then turned on for everyone. IRMS, Clinical Coordinators, individuals, or services can then disable individual order checks if they choose to.

## Order Checking Management Menu

Several parameters must be set before certain order checks can work properly. Options in the Order Checking Management Options Menu allow you to set these parameters.

Option	Description
1 Enable/Disable an Order Check	Enter the processing flag for an entity.
2 Set Clinical Danger Level for an Order Check	Enter the code indicating the clinical danger level of an order check.
3 CAT Scanner Height Limit	Enter a value in inches witch Order Checking uses to see if a patient is too tall to be examined by the CAT scanner.
4 CAT Scanner Weight Limit	Enter a value in pounds witch Order Checking uses to see if a patient weighs too much to be examined by the CAT scanner.
5 MRI Scanner Height Limit	Enter a value in inches witch Order Checking uses to see if the patient is too tall to be safely examined by the MRI Scanner.
6 MRI Scanner Weight Limit	Enter a value in pounds witch Order Checking uses to see if the patient weighs too much to be safely examined by the MRI Scanner
7 Orderable Item Duplicate Order Range	Enter the number of hours back in time too check for duplicate orders for a specific orderable item.
8 Lab Duplicate Order Range	Enter the number of hours back in time to check for duplicate Lab orders.
9 Radiology Duplicate Order Range	Enter the number of hours back in time to check for duplicate Radiology orders.
10 Enable or Disable Order Checking System	Turns order checking on or off for the entire institution or for a single division.
11 Enable or Disable Debug Message Logging	Turn Debug Message Logging on or off
12 Display the Order Checks a User Can Receive	Produces a report giving the Enable/ Disable status of each order check for a particular user.
13 Edit Site Local Terms	Map local orderable items or laboratory test names to standard terms used by the Order Checking system.
14. Set Number of Medications for Polypharmacy	Use this option to set the number of medications for determining polypharmacy.

 **NOTE:** The pharmacy duplicate order range is not determined by CPRS parameters. It is determined within the Pharmacy packages. See the Pharmacy National Drug File (NDF) documentation for a list of Pharmacy order checks.

## Order Checking, cont'd

### Enable/Disable an Order Check

Use this option to turn specific order checks on or off for a user or location. The option works by entering a processing flag for an entity and order check. The entity can be a user, location, service, division, or system.

### Processing flags

**E (Enabled):** Order check is enabled for the entity unless an entity of higher precedence has order check disabled (e.g. if Enabled at System level and Disabled at User level, order check is not processed).

**D (Disabled):** Order check is disabled for the entity unless an entity of higher precedence has the order check Enabled (e.g. if Disabled at System level and Enabled at User level, order check is processed).

### Example

```
Select Order Checking Management Options Option: 1  Enable/Disable an Order Check
```

```
Enable/Disable an Order Check
```

```
-----  
may be set for the following:
```

1	User	USR	[choose from NEW PERSON]
2	Location	LOC	[choose from HOSPITAL LOCATION]
3	Service	SRV	[choose from SERVICE/SECTION]
4	Division	DIV	[REGION 5]
5	System	SYS	[OEX.ISC-SLC.VA.GOV]

```
Enter selection: 1  User  NEW PERSON
```

```
Select NEW PERSON NAME: SNOW,CHARLES R.          CRS          PHYSICIAN
```

```
----- Setting for User: SNOW,CHARLES R. -----
```

Order Check	Value
DUPLICATE ORDER	Enabled

```
Select Order Check: ?
```

```
Answer with ORDER CHECKS NAME
```

```
Do you want the entire 21-Entry ORDER CHECKS List? Y  (Yes)
```

```
Choose from:
```

```
ALLERGY-CONTRAST MEDIA INTERAC  
ALLERGY-DRUG INTERACTION  
AMINOGLYCOSIDE ORDERED  
BIOCHEM ABNORMALITY FOR CONTRA  
CLOZAPINE APPROPRIATENESS  
CRITICAL DRUG INTERACTION  
CT & MRI PHYSICAL LIMITATIONS  
DISPENSE DRUG NOT SELECTED  
DUPLICATE DRUG CLASS ORDER  
DUPLICATE DRUG ORDER  
DUPLICATE ORDER  
ERROR MESSAGE  
ESTIMATED CREATININE CLEARANCE  
GLUCOPHAGE-CONTRAST MEDIA  
LAB ORDER FREQ RESTRICTIONS  
MISSING LAB TESTS FOR ANGIOGRA  
ORDER CHECKING NOT AVAILABLE  
POLYPHARMACY
```

## Order Checking, cont'd

### Enable/Disable an Order Check, cont'd

RECENT BARIUM STUDY	
RECENT ORAL CHOLECYSTOGRAM	
RENAL FUNCTIONS OVER AGE 65	
SIGNIFICANT DRUG INTERACTION	

Order Check	Value
-----	----
DUPLICATE ORDER	Enabled

Select Order Check: **ESTIMATED CREATININE CLEARANCE**

Are you adding ESTIMATED CREATININE CLEARANCE as a new Order Check? Yes//

**<Enter>** YES

1 Enabled

2 Disabled

Choose 1-2: **1** Enabled

Value: Enabled

Select Order Check: **<Enter>**

may be set for the following:

1	User	USR	[choose from NEW PERSON]
2	Location	LOC	[choose from HOSPITAL LOCATION]
3	Service	SRV	[choose from SERVICE/SECTION]
4	Division	DIV	[REGION 5]
5	System	SYS	[OEX.ISC-SLC.VA.GOV]

Enter selection: **<Enter>**

Select Order Checking Management Option:

## Set Clinical Danger Level for an Order Check


Enter the code indicating the clinical danger level of an order check. Order checks come with a pre-set danger level as given in the following table:

PARAMETER: ORK CLINICAL DANGER LEVEL ENTITY: ORDER ENTRY/RESULTS REPORTING	
Order Check	Value
ALLERGY-CONTRAST MEDIA INTERAC	High
ALLERGY-DRUG INTERACTION	High
AMINOGLYCOSIDE ORDERED	High
BIOCHEM ABNORMALITY FOR CONTRA	High
CLOZAPINE APPROPRIATENESS	High
CRITICAL DRUG INTERACTION	High
CT & MRI PHYSICAL LIMITATIONS	High
DISPENSE DRUG NOT SELECTED	High
DUPLICATE DRUG CLASS ORDER	High
DUPLICATE DRUG ORDER	High
DUPLICATE ORDER	Moderate
ERROR MESSAGE	Low
ESTIMATED CREATININE CLEARANCE	Moderate
GLUCOPHAGE-CONTRAST MEDIA	High
LAB ORDER FREQ RESTRICTIONS	Moderate
MISSING LAB TESTS FOR ANGIOGRA	High
ORDER CHECKING NOT AVAILABLE	Low
POLYPHARMCY	Moderate
RECENT BARIUM STUDY	High
RECENT ORAL CHOLECYSTOGRAM	High
RENAL FUNCTIONS OVER AGE 65	Moderate
SIGNIFICANT DRUG INTERACTION	Moderate

These danger levels are based on rules supplied by a panel of physicians.

### Danger level codes:

- 1 (High): Order check indicates a potentially high danger to the patient.
- 2 (Moderate): Order check indicates a moderate danger to the patient.
- 3 (Low): Order check indicates a low danger to the patient.

 NOTE: High danger level order checks require entry of a reason if they are overridden. Moderate and low order checks can be overridden without entry of a reason.



## Order Checking, cont'd

### Example: Changing the clinical danger level on an order check

```
Select CPRS Configuration Menu (Clin Coord)Option: OC Order Checking
Management Options
Select Order Checking Management Options Option: 2 Set Clinical Danger
Level for an Order Check
      Set Clinical Danger Level for an Order Check
-----
may be set for the following:
      1  Division      DIV      [REGION 5]
      2  System        SYS      [OEX.ISC-SLC.VA.GOV]

Enter selection: 1 Division REGION 5

----- Setting CLINICAL DANGER LEVEL for Division: REGION 5 -----
      Order Check      Value
      -----
      CRITICAL DRUG INTERACTION      High
      DUPLICATE DRUG CLASS ORDER      High
Select Order Check: ?
Answer with ORDER CHECKS NAME
Do you want the entire 20-Entry ORDER CHECKS List? Y (Yes)
Choose from:
ALLERGY-CONTRAST MEDIA INTERAC
ALLERGY-DRUG INTERACTION
AMINOGLYCOSIDE ORDERED
BIOCHEM ABNORMALITY FOR CONTRA
CLOZAPINE APPROPRIATENESS
CRITICAL DRUG INTERACTION
CT & MRI PHYSICAL LIMITATIONS
DUPLICATE DRUG CLASS ORDER
DUPLICATE DRUG ORDER
DUPLICATE ORDER
ESTIMATED CREATININE CLEARANCE
GLUCOPHAGE-CONTRAST MEDIA
LAB ORDER FREQ RESTRICTIONS
MISSING LAB TESTS FOR ANGIOGRA
ORDER CHECKING NOT AVAILABLE
PT & PTT FOR FRESH FROZEN PLAS
RECENT BARIUM STUDY
RECENT ORAL CHOLECYSTOGRAM
RENAL FUNCTIONS OVER AGE 65
SIGNIFICANT DRUG INTERACTION
      Order Check      Value
      -----
      CRITICAL DRUG INTERACTION      High
      DUPLICATE DRUG CLASS ORDER      High

Select Order Check: DUPLICATE DRUG CLASS ORDER

Order Check: DUPLICATE DRUG CLASS ORDER Replace <Enter> DUPLICATE DRUG
CLASS ORDER
Value: High// Moderate Moderate
      Order Check      Value
      -----
      CRITICAL DRUG INTERACTION      High
      DUPLICATE DRUG CLASS ORDER      Moderate
Select Order Check: <Enter>
```

## *Order Checking, cont'd*

### **CAT Scanner Height Limit**

Enter the maximum height that the Computerized Axial Tomography (CAT) scanner can accommodate. This figure is then used in the built-in order check for patient height triggered whenever an order is submitted for a CAT scan procedure. The height is entered in whole inches.

**Example: the maximum height for system is changed from 75 (6' 3") to 76 inches (6' 4").**

```
Select Order Checking Management Options Option:3 CAT Scanner Height
Limit
TITLE = CT Scanner Height Limit
          CT Scanner Height Limit
-----

may be set for the following:

    1  Division      DIV    [REGION 5]
    2  System        SYS    [OEX.ISC-SLC.VA.GOV]

Enter selection: 2  System  OEX.ISC-SLC.VA.GOV

----- Setting  for System: OEX.ISC-SLC.VA.GOV -----

Value: 75// 76    76

may be set for the following:

    1  Division      DIV    [REGION 5]
    2  System        SYS    [OEX.ISC-SLC.VA.GOV]

Enter selection: <Enter>

Select Order Checking Management Options Option: <Enter>
```

## *Order Checking, cont'd*

### **CAT Scanner Weight Limit**

Enter the maximum weight the CAT scanner can accommodate. This figure is then used in the built-in order check for patient weight triggered whenever an order is submitted for a CAT scan procedure. The weight is entered in whole pounds.

**Example: the maximum weight for system is changed from 200 to 225 pounds.**

```
Select Order Checking Management Options Option:4 CAT Scanner Weight
Limit
TITLE = CAT Scanner Weight Limit
          CAT Scanner Weight Limit
-----
may be set for the following:
      1  Division      DIV    [REGION 5]
      2  System        SYS    [OEX.ISC-SLC.VA.GOV]
Enter selection: 2 System OEX.ISC-SLC.VA.GOV
----- Setting for System: OEX.ISC-SLC.VA.GOV -----
Value: 200// 225 225
may be set for the following:
      1  Division      DIV    [REGION 5]
      2  System        SYS    [OEX.ISC-SLC.VA.GOV]
Enter selection: <Enter>
Select Order Checking Management Options Option: <Enter>
```

## *Order Checking, cont'd*

### **MRI Scanner Height Limit**

Enter the maximum height that the Magnetic Resonance Imaging (MRI) scanner can accommodate. This figure is then used in the built-in order check for patient height triggered whenever an order is submitted for an MRI procedure. The height is entered in whole inches.

In the following example, the height limit for the scanner at division is changed from 6 feet 5 inches (77 inches) to 6 feet 3 inches:

```
Select Order Checking Management Option: 5 MRI Scanner Height Limit
TITLE = MRI Scanner Height Limit
MRI Scanner Height Limit
-----
may be set for the following:
    1  Division      DIV  [REGION 5]
    2  System        SYS  [OEX.ISC-SLC.VA.GOV]
Enter selection: 1  Division  REGION 5
----- Setting  for Division: REGION 5 -----
Value: 77// 75  75
may be set for the following:
    1  Division      DIV  [REGION 5]
    2  System        SYS  [OEX.ISC-SLC.VA.GOV]
Enter selection:<Enter>
```

## *Order Checking, cont'd*

### **MRI Scanner Weight Limit**

This parameter is used by order checking to determine if a patient is too heavy to be examined in the MRI scanner. The value indicates the maximum weight (in pounds) allowed.

**Example: the MRI weight limit for system is changed from 275 to 250 pounds:**

```
Select Order Checking Management Option: 6  MRI Scanner Weight Limit
TITLE = MRI Scanner Weight Limit

MRI Scanner Weight Limit
-----

may be set for the following:

1  Division      DIV  [REGION 5]
2  System        SYS  [OEX.ISC-SLC.VA.GOV]

Enter selection: 2  System  OEX.ISC-SLC.VA.GOV

----- Setting  for System: OEX.ISC-SLC.VA.GOV -----

Value: 275// 250  250

may be set for the following:

1  Division      DIV  [REGION 5]
2  System        SYS  [OEX.ISC-SLC.VA.GOV]

Enter selection:<Enter>
```

## Order Checking, cont'd

### Orderable Item Duplicate Order Range

Use this option to set the number of hours backwards in time to look for duplicate orders related to specific orderable items. The duplicate order range for lab and radiology procedures in general is set by the Lab Duplicate Order Range and Radiology Duplicate Order Range options.

#### Example:

```
Select Order Checking Mgmt Menu Option: 7 Orderable Item Duplicate Order
Range
TITLE = Orderable Item Duplicate Order Range

                                Orderable Item Duplicate Order Range
-----

may be set for the following:

    1  Location      LOC    [choose from HOSPITAL LOCATION]
    2  Service       SRV    [choose from SERVICE/SECTION]
    3  Division      DIV    [REGION 5]
    4  System        SYS    [OEX.ISC-SLC.VA.GOV]

Enter selection: 1 Location  HOSPITAL LOCATION
Select HOSPITAL LOCATION NAME: CARDIOLOGY          RUSSELL,JOEL

----- Setting   for Location: CARDIOLOGY -----
Select Instance:  GASTROENTEROLOGY
Are you adding GASTROENTEROLOGY as a new Instance? Yes//<Enter>  YES

Instance: GASTROENTEROLOGY// <Enter>  GASTROENTEROLOGY  GASTROENTEROLOGY
Value: ?

Enter the number of hours back in time you wish to check for duplicate
orders.

Value: 24
Select Instance: <Enter>

may be set for the following:


    1  Location      LOC    [choose from HOSPITAL LOCATION]
    2  Service       SRV    [choose from SERVICE/SECTION]
    3  Division      DIV    [REGION 5]
    4  System        SYS    [OEX.ISC-SLC.VA.GOV]

Enter selection: <Enter>
```

## Order Checking, cont'd

### Lab Duplicate Order Range

Use this option to set the number of hours backwards in time to look for duplicate lab orders. For example, a value of “24” indicates a lab procedure intended to be collected within 24 hours of the collection of the same lab procedure will trigger an order check indicating duplicate lab order.

 **NOTE:** If the lab procedure has an entry in the option (parameter) ORK DUP ORDER RANGE OI, the OI parameter value takes precedence.

**Example:** the duplicate lab order range is changed from 24 hours to 48 hours for System:

```
Select Order Checking Management Option: 8  Lab Duplicate Order Range
TITLE = Lab Duplicate Order Range

                                Lab Duplicate Order Range
-----

may be set for the following:

    1  Service      SRV  [choose from SERVICE/SECTION]
    2  Division     DIV  [REGION 5]
    3  System       SYS  [OEX.ISC-SLC.VA.GOV]

Enter selection: 3  System  OEX.ISC-SLC.VA.GOV
----- Setting  for System: OEX.ISC-SLC.VA.GOV -----

Value: 24// 48  48

may be set for the following:

    1  Service      SRV  [choose from SERVICE/SECTION]
    2  Division     DIV  [REGION 5]
    3  System       SYS  [OEX.ISC-SLC.VA.GOV]

Enter selection:<Enter>
```

In this example, all lab procedures except those with an entry in the Orderable Item Duplicate Order Range option will have a duplicate order range of 48 hours.

## Order Checking, cont'd

### Radiology Duplicate Order Range

Use this option to set the number of hours backwards in time to look for duplicate radiology orders. For example, a value of "48" indicates a radiology procedure intended to be performed within 48 hours of the completion of the same radiology procedure will trigger an order check indicating duplicate radiology order.

☞ **NOTE:** If the radiology procedure has an entry in the option (parameter) ORK DUP ORDER RANGE OI, the OI parameter value takes precedence.

**Example: The duplicate radiology order range is changed from 48 hours to 24 hours for Division:**

```
Select Order Checking Management Option: 9 Radiology Duplicate Order Range
TITLE = Imaging Duplicate Order Range

                                Imaging Duplicate Order Range
                                -----

may be set for the following:

    1 Service      SRV    [choose from SERVICE/SECTION]
    2 Division     DIV    [REGION 5]
    3 System       SYS    [OEX.ISC-SLC.VA.GOV]

Enter selection: 2 Division REGION 5

----- Setting for Division: REGION 5 -----

Value: 48// 24 24

may be set for the following:

    1 Service      SRV    [choose from SERVICE/SECTION]
    2 Division     DIV    [REGION 5]
    3 System       SYS    [OEX.ISC-SLC.VA.GOV]

Enter selection:<Enter>
```

In this example, all radiology procedures except those with an entry in the Orderable Item Duplicate Order Range option will have a duplicate order range of 24 hours.



## *Order Checking, cont'd*

### **Enable or Disable Order Checking System**

This option lets you determine if any order checking processing occurs in the entire Order Checking system.

**E (Enabled):** Indicates the Order Checking system is enabled and running.

**D (Disabled):** Indicates the Order Checking system is disabled and not running.

This parameter is set to Disabled in the exported version of Order Checking. IRMS can set this to Enabled as part of the implementation process.

### **Example: Order Checking is enabled on the Division level:**

```
Select Order Checking Management Option: 10  Enable or Disable Order
Checking System

                                Enable or Disable Order Checking System
                                -----

may be set for the following:

    1  Division      DIV    [REGION 5]
    2  System        SYS    [OEX.ISC-SLC.VA.GOV]

Enter selection: 1  Division    REGION 5

----- Setting for Division: REGION 5 -----

Value: Disable// e  Enable    Enable

may be set for the following:

    1  Division      DIV    [REGION 5]
    2  System        SYS    [OEX.ISC-SLC.VA.GOV]

Enter selection: <Enter>
```

## *Order Checking, cont'd*

### **Enable or Disable Debug Message Logging**

The Order Checking system can keep a log of special messages designed to assist in debugging Order Checking problems.

### **Example: Turning on Order Checking Debug Messages log**

```
Select Order Checking Management Option: 11  Enable or Disable Debug Message
Logging
TITLE = Enable or Disable Logging Debug Messages

                                     Enable or Disable Logging Debug Messages
-----

may be set for the following:

      1  Division      DIV      [REGION 5]
      2  System        SYS      [OEX.ISC-SLC.VA.GOV]

Enter selection: 2  System  OEX.ISC-SLC.VA.GOV

----- Setting  for System: OEX.ISC-SLC.VA.GOV -----

Value: ?

Enter 'Enable/E' to log debug messages.

      Select one of the following:


              E      Enable
              D      Disable

Value: E  Enable  Enable

may be set for the following:

      1  Division      DIV      [REGION 5]
      2  System        SYS      [OEX.ISC-SLC.VA.GOV]

Enter selection:
```

 **NOTE: The Log File takes a large amount of disk space when it is enabled. This option should be disabled again as soon as logging is no longer needed for debugging purposes.**

## Order Checking, cont'd

### Display the Order Checks a User Can Receive

This option displays a list of all Order Checks annotated with the status of each processing flag. The right hand column has an explanation for the processing flag status.

The processing flag can be set on one or more of five levels. The flag that is in effect is the one with the lowest entity precedence as given in the following list:

ENTITY PRECEDENCE: 1 ENTITY TYPE: User  
ENTITY PRECEDENCE: 2 ENTITY TYPE: Location  
ENTITY PRECEDENCE: 3 ENTITY TYPE: Service  
ENTITY PRECEDENCE: 4 ENTITY TYPE: Division  
ENTITY PRECEDENCE: 5 ENTITY TYPE: System

### Example List:

```
Select Order Checking Management Option: 12  Display the Order Checks a User Can
Receive
Enter user's name: SNOW,CHARLES// <Enter>          CRS

Would you like help understanding the list of order checks? No// Y  (Yes)
DEVICE: HOME// <Enter>  VAX

                        Order Check List Help Message                      Page:   1

The delivery of order checks is determined from values set for Users,
Inpatient Locations, Service/Sections, Hospital Divisions, Computer System and
OERR. Possible values include 'Enabled' and 'Disabled'. These values indicate
a User's, Location's, Service/Section's, Division's, System's and OERR's
desire for the order check to be 'Enabled' (displayed under most
circumstances) or 'Disabled' (normally not displayed.)

All values, except the OERR (Order Entry) value, can be set by IRM
or Clinical Coordinators. Individual users can set their 'Enabled/Disabled'
values for each specific order check via the 'Enable/Disable My Order Checks'
option under the Personal Preferences and Order Check Management for Users.
'ON' indicates the user will receive the order check under normal conditions.
'OFF' indicates the user normally will not receive the order check.
Order check recipient determination can also be influenced by patient
location (inpatients only.) This list does not consider patient location
when calculating the ON/OFF value for an order check because a patient is
not known when the option is selected.

Press RETURN to continue or '^' to exit:

                        Order Check List Help Message                      Page:   2
                        - End of Report -

Press RETURN to continue: <Enter>

This will take a moment or two, please stand by.....
DEVICE: HOME// <Enter>  VAX
```

## Order Checking, cont'd

### Display the Order Checks a User Can Receive, cont'd

Order Check List for GREEN,JOANN		Page: 1
Order Check	ON/OFF For This User and Why	
ALLERGY-CONTRAST MEDIA INTERAC	ON	OERR value is Enabled
ALLERGY-DRUG INTERACTION	ON	User's service MEDICINE value is Enabled
AMINOGLYCOSIDE ORDERED	OFF	Division value is Disabled
BIOCHEM ABNORMALITY FOR CONTRA	ON	OERR value is Enabled
CLOZAPINE APPROPRIATENESS	ON	OERR value is Enabled
CRITICAL DRUG INTERACTION	ON	User value is Enabled
CT & MRI PHYSICAL LIMITATIONS	OFF	User's service MEDICINE value is Disabled
DISPENSE DRUG NOT SELECTED	ON	OERR value is Enabled
DUPLICATE DRUG CLASS ORDER	ON	OERR value is Enabled
DUPLICATE DRUG ORDER	ON	User value is Enabled
DUPLICATE ORDER	ON	System value is Enabled
ERROR MESSAGE	ON	OERR value is Enabled
ESTIMATED CREATININE CLEARANCE	ON	OERR value is Enabled
GLUCOPHAGE-CONTRAST MEDIA	ON	Division value is Enabled
GLUCOPHAGE-LAB RESULTS	ON	OERR is Enabled
LAB ORDER FREQ RESTRICTIONS	OFF	Division value is Disabled
MISSING LAB TESTS FOR ANGIOGRA	ON	OERR value is Enabled
ORDER CHECKING NOT AVAILABLE	ON	OERR value is Enabled
POLYPHARMACY	ON	OERR value is Enabled
RECENT BARIUM STUDY	ON	OERR value is Enabled
RECENT ORAL CHOLECYSTOGRAM	ON	OERR value is Enabled
RENAL FUNCTIONS OVER AGE 65	ON	OERR value is Enabled
SIGNIFICANT DRUG INTERACTION	ON	User value is Enabled
- End of Report -		
Press RETURN to continue:		

## Edit Site Local Terms

After CPRS installation, each site must run this option to link terms used in the expert system to local terms. Some terms like DNR and NPO diet must be mapped to one or more entries in the orderable item file. Other terms like Serum Creatinine must be mapped to the lab test file. See the Notifications section in this manual for a description of this option.

Nat'l Expert System Term	Linked File	Order Check
SERUM CREATININE	LAB [60]	AMINOGLYCOSIDE ORDERED
		BIOCHEM ABNORMALITY FOR CONTRAST MEDIA
		ESTIMATED CREATININE CLEARANCE
		RENAL FUNCTIONS OVER AGE 65
SERUM UREA NITROGEN	LAB [60]	AMINOGLYCOSIDE ORDERED
		BIOCHEM ABNORMALITY FOR CONTRAST MEDIA
		ESTIMATED CREATININE CLEARANCE
		RENAL FUNCTIONS OVER AGE 65
ANGIOGRAM,CATH – PERIPHERA	OI [101.43]	MISSING LAB TESTS FOR ANGIOGRAM PROCEDUR
PROTHROMBIN TIME	OI [101.43]	MISSING LAB TESTS FOR ANGIOGRAM PROCEDUR
THROMBOPLASTIN TIME PARTIA	OI [101.43]	MISSING LAB TESTS FOR ANGIOGRAM PROCEDUR
WHITE BLOOD COUNT (WBC)	LAB [60]	CLOZAPINE APPROPRIATENESS
BLOOD SPECIMEN	TOPOG [61]	CLOZAPINE APPROPRIATENESS
SERUM SPECIMEN	TOPOG [61]	AMINOGLYCOSIDE ORDERED
		BIOCHEM ABNORMALITY FOR CONTRAST MEDIA
		ESTIMATED CREATININE CLEARANCE
		RENAL FUNCTIONS OVER AGE 65

## 8. Menu Management

### a. CPRS Menu Assignment

We recommend that you assign menus as follows:

Menu Text	Option Name	Assignment
CPRS Manager Menu	ORMGR MENU	IRMS specialists assigned to CPRS
Clinician Menu	OR MAIN MENU CLINICIAN	Clinicians (physicians, psychologists, social workers, nurse practitioners, PAs, etc.)
Nurse Menu	OR MAIN MENU NURSE	Nurses
Ward Clerk Menu	OR MAIN MENU WARD CLERK	Ward Clerks, MAS personnel
CPRS Configuration Menu (Clin Coord)	ORCL MENU	Clinical Coordinators, ADPACS,
CPRS Configuration Menu (IRM)	ORE MGR	IRMS CPRS specialist (locked with XUPROG key)

### Clinician, Nurse, or Ward Clerk Menus

These menus all contain the same options, but available actions are defined by keys and the assignment of a primary add order menu. These are also the same options available with OE/RR 2.5, but they function somewhat differently in CPRS.

Abbr	Menu text	Name	Description
RO	Act On Existing Orders	OR REVIEW ORDERS	This option takes you to the patient selection screen.
AD	Add New Orders	OR ADD MENU CLINICIAN	This option takes you to the patient selection screen,
OE	CPRS Clinician Menu	OR OE/RR MENU CLINICIAN	This is the main option for accessing the patient chart.
PP	Personal Preferences	ORPO MENU	This menu allows users to select their personal preferences in options and formats used in CPRS.
RR	Results Reporting Menu	OR RESULTS REPORTING	This action type option sets up and calls MAIN^ORSDVR to allow selection of multiple patients, followed by multiple reports. It then asks any parameters associated with the selected reports and gets a device to which the reports will be printed by patient.

## CPRS Configuration Menu [OR PARAM COORDINATOR MENU]

This menu is intended for Clinical Application Coordinators. It contains options for setting up and managing CPRS options and parameters.

Menu Text	Option name	Description
Allocate OE/RR Security Keys	ORCL KEY ALLOCATION	This option lets Clinical Coordinators allocate security keys to CPRS clinicians, nurses, or ward clerks.
Check for Multiple Keys	OR PARAM SYSTEM	This menu, for IRMS and coordinators, lets you set various parameters, including order checking and notification parameters. It also lets you allocate security keys.
Edit DC Reasons	ORCL ORDER REASON	This option allows access to the Order Reason file to enter or edit reasons for discontinuing an order.
GUI Parameters	ORW PARAM GUI	Configuration parameters for the CPRS GUI.
Miscellaneous Parameters	OR PARAM ORDER MISC	This option is for editing miscellaneous hospital wide CPRS parameters, such as active orders time range, grace days before purge, whether to automatically unflag orders, confirm providers, review on patient movement, etc.
Notification Mgmt Menu	ORB NOT COORD MENU	This menu is used by clinical coordinators and IRM staff to turn notifications on or off for a provider. It prompts the coordinator for the user, then calls other notification mgmt options. It also contains options that can purge existing notifications.
Order Checking Management ...	ORK ORDER CHK MGMT MENU	Options on this menu allow IRMS to set order checking parameters for each of the possible entities: System, Division, Service, Location, Team, Class, or User, as applicable.
Order Menu Management ...	ORCM MGMT	Options on this menu let you enter or edit orderable items, prompts, generic orders, quick orders, order sets, and order menus. It also lets you convert protocols.
Patient List Mgmt Menu..	ORLP PATIENT LIST MGMT MENU	This menu allows coordinators and IRMS to create and manage personal and patient team lists and to set default patient list parameters.
Print/Report Parameters	OR PARAM PRINTS	This menu is for editing print parameters. It should be available to the clinical coordinator and IRM Staff.
Print Formats	ORCL PRINT FORMAT	This option allows the user to define formats for printing labels and requisitions for orders.
Release/Cancel Delayed Orders	ORC DELAYED ORDERS	This option allows clinical coordinators to release or cancel orders that have been put on delay, but then weren't ever released for some reason.

### **CPRS Configuration (IRM) [OR PARAM IRM MENU]**

As the name implies, this menu is intended primarily for IRMS specialists who will be maintaining and troubleshooting the more technical aspects of CPRS.

<b>Option</b>	<b>Menu Text</b>	<b>Description</b>
OCX MAIN	Order Check Expert System Main Menu	These options are used for troubleshooting Order Checking and Notifications, for compiling the expert system rules, and for linking local terms with national terms for order checking.
ORMTIME MAIN	ORMTIME Main Menu	These options are intended for IRMS only, and are used in conjunction with the ORTASK routines.
ORE MGR	CPRS Clean-up Utilities	This menu contains an option that checks consistency between lab files and OE/RR files.
XPAR MENU TOOLS	General Parameter Tools	This menu contains general-purpose tools for managing parameters.



## b. Order Menu Management

This menu is exported with Patch 49, and is also on the CPRS Configuration Menu (Clin Coord), on the CPRS Manager Menu.

If your site used OE/RR 2.5, most of your menus, quick orders, and generic orders are converted to CPRS when it's installed. Order Menu Management options can help you convert protocols that weren't automatically converted, edit or create quick orders and generic orders, create order sets, and assign primary order menus.

If your site hasn't used OE/RR 2.5, you can use options on the Order Menu Management menu (distributed with the pre-installation patch, OR\*2.5\*49, or on the CPRS Configuration Menu when CPRS is installed) to begin creating menus, quick orders, and parameters.

***If your site hasn't used OE/RR 2.5, you must create and assign primary order menus for all of your users.***

Option Name	Menu Text	Description
ORCM ORDERABLES	Enter/edit orderable items	Lets you enter or edit generic order items.
ORCM PROMPTS	Enter/edit prompts	Lets you add or edit prompts for generic order dialogs.
ORCM ORDERS	Enter/edit generic orders	Lets you add or edit free-text orders.
ORCM QUICK ORDERS	Enter/edit quick orders	Lets you create or modify quick orders.
ORCM ORDER SETS	Enter/edit order sets	Lets you create or modify order sets.
ORCM ACTIONS	Enter/edit actions	Lets you enter or edit entry and exit actions for order dialogs.
ORCM MENU	Enter/edit order menus	Lets you modify the current order menus or create new ones for your site.
ORCM PROTOCOLS	Convert protocols	Lets you convert any protocols that didn't get automatically converted by the installation.
OR PARAM ADD MENU	Assign Primary Order Menu	This option is used to assign a primary order menu to users. A primary order menu must be assigned to each user in order to add orders using OE/RR. Examples of menus assigned to users: ORZ ADD MENU CLINICIAN ORZ ADD MENU NURSE ORZ ADD MENU WARD CLERK
ORCM SEARCH/REPLACE	Search/Replace Components	Lets you search for specific components on menus and replace them with new ones.
ORCM LIST ORDER MENUS	List Primary Order Menus	This option lets you print a list of the add order menu assigned to particular users, locations, divisions etc. .

## Orderable Items

Orderable items correspond to those services or products that may be requested and provided by the patient care services. They can be things such as a lab test, an imaging procedure, or a medication. The ORDERABLE ITEM file (#101.43) contains the orderable items for each service. CPRS uses orderable items to identify the specific thing that has been ordered. Each package that interfaces with CPRS provides a mechanism to update or add to the orderable items belonging to the package.

## Generic Orders

Nursing and Activity orders, often referred to as *generic orders*, have no defined specifications for the required prompts or the format of the order text. The option *Enter/edit orderable items* [ORCM ORDERABLES] lets you add new entries of the nursing care or activity types.

Generic orders are comprised of:

1. *Orderable Item*

Defines the exact service or product being requested. This is easy to define for ancillary service orders in the hospital such as radiology or pharmacy, but for generic orders, the Clinical Coordinator or IRMS defines and creates the orderable items.

2. *Prompts*

Prompts ask information about the order being placed.

3. *Start and stop dates*

To create a generic order, we recommend that you first write the text of the order, as you would like it to read. Then you can construct a generic order that will put the text together to read as you have written it.

## Naming Conventions

We recommend that you select naming conventions for the orderable items, prompts, and generic orders that you create using the Order Menu Management options.

Advantages:

- Allows similar types of order dialogs to be grouped together by name so that the type is apparent
- Allows those managing the order dialogs to find a specific order dialog more quickly because the names are organized by type

All applications interfacing with CPRS use consistent naming conventions to easily identify those order dialogs that belong with that application.

Suggested naming conventions:

ORZ GTX	prompt type
ORZ	dialog type (generic orders)
ORZ ADD MENU	add order menus

## Enter/Edit Orderable Items

This option lets you enter new generic orderable items to be placed on CPRS Add Orders menus, or to edit existing generic orderable items (e.g., change their names to ones more meaningful to your users).

1. Select Enter/edit orderable items from the Order Menu Management menu.

```
Select Option: Order Menu Management Option

OI      Enter/edit orderable items
PM      Enter/edit prompts
GO      Enter/edit generic orders
QO      Enter/edit quick orders
ST      Enter/edit order sets
AC      Enter/edit actions
MN      Enter/edit order menus
AO      Assign Primary Order Menu
CP      Convert protocols
SR      Search/replace components
LM      List Primary Order Menu

You have PENDING ALERTS
      Enter "VA VIEW ALERTS      to review alerts

Select Order Menu Management Option: OI Enter/edit orderable items
```

2. Enter the Type of orderable item, Activity or Nursing that you wish to add or edit.
3. Enter the orderable item for the type you chose. If you enter two question marks, a list of generic orders for your site is displayed. Select the orderable item you wish to edit, or enter a new orderable item.

### Activity order

```
Type of Orderable: ?
Answer with DISPLAY GROUP NAME
Do you want the entire DISPLAY GROUP List? Y (Yes)
Choose from:
ACTIVITY
NURSING
Type of Orderable: Activity
Select ORDERABLE ITEMS: ?
Answer with ORDERABLE ITEMS
Do you want the entire ORDERABLE ITEMS List? Y (Yes)
Choose from:
AIR MATTRESS
ARTERIAL LINE
ARTERIAL SHEATH
^
      You may enter a new ORDERABLE ITEMS, if you wish
      Answer must be 3-63 characters in length.
Select ORDERABLE ITEMS: JUNK FOOD
Are you adding 'JUNK FOOD' as a new ORDERABLE ITEMS (the 3364TH)? No//
Y (Yes)
```

## Enter/edit Prompts

Prompts are the second component of the order dialog that makes up a generic order dialog. This type of order dialog corresponds to the *term type* protocol in OE/RR 2.5. However, rather than using VA FileMan to create the prompt, you can now use this option.

This option lets you add or edit prompts of the following types:

D	date/time
R	relative date/time
F	free text
N	numeric
S	set of codes
P	pointer to a file
Y	yes/no
W	word processing

### Date/Time Example

```
Select Order Menu Management Option: Enter/edit prompts
Select PROMPT: start date/time ORZ GTX START DATE/TIME
Are you adding 'ORZ GTX START DATE/TIME ' as
    a new ORDER DIALOG? No// y YES
TEXT OF PROMPT: Start Date/Time
TYPE OF PROMPT: date/time
CAN DATE BE IMPRECISE? NO// ?

Enter either 'Y' or 'N'.

CAN DATE BE IMPRECISE? NO// y YES
CAN TIME OF DAY BE ENTERED? YES//<Enter>
CAN SECONDS BE ENTERED? NO//<Enter>
IS TIME REQUIRED? NO// y YES
DESCRIPTION:
    1<Enter>
Select PROMPT:<Enter>
```

### Free Text Example

```
Select Order Menu Management Option: Enter/edit prompts
Select PROMPT: Free Text ORZ GTX FREE TEXT JG
Are you adding 'ORZ GTX FREE TEXT JG' as
    a new ORDER DIALOG? No// y YES
NAME: ORZ GTX FREE TEXT JG Replace <Enter>
TEXT OF PROMPT: Special Instructions: Replace
TYPE OF PROMPT: free text//
DESCRIPTION:
    No existing text
Edit? NO// <Enter>
Min/max length
```

## *Enter/edit Prompts, cont'd*

### **Numeric Example**

```
Select Order Menu Management Option:  Enter/edit prompts
Select PROMPT: start date/time      ORZ NUMBER 1-24
Are you adding 'ORZ NUMBER 1-24' as
    a new ORDER DIALOG? No// y YES
TEXT OF PROMPT: Number of hours:
TYPE OF PROMPT: numeric
INCLUSIVE LOWER BOUND: 1// <Enter>
INCLUSIVE UPPER BOUND: 24// <Enter>
MAXIMUM NUMBER OF FRACTIONAL DIGITS: 1// <Enter>
DESCRIPTION:
    No existing text
    Edit? NO// <Enter>
```

### **Set of Codes Example**

```
Select Order Menu Management Option:  Enter/edit prompts
Select PROMPT: DAY OF WEEK          ORZ DAY OF WEEK
Are you adding ' ORZ DAY OF WEEK' as
    a new ORDER DIALOG? No// y YES
TEXT OF PROMPT: DAY OF WEEK
TYPE OF PROMPT: set of codes
INTERNALLY-STORED CODE: M//  WILL STAND FOR:  Monday// <Enter>
INTERNALLY-STORED CODE: T//  WILL STAND FOR:  Tuesday//<Enter>
INTERNALLY-STORED CODE: W//  WILL STAND FOR:  Wednesday//<Enter>
INTERNALLY-STORED CODE: TH//  WILL STAND FOR:  Thursday//<Enter>
INTERNALLY-STORED CODE: F//   WILL STAND FOR:  Friday//<Enter>
DESCRIPTION: <Enter>
    This prompt will ask for a selection from the local treatment group file.
    Edit? NO//<Enter>
```

### **Pointer Example**

```
Select Order Menu Management Option:  Enter/edit prompts
Select PROMPT: location:           ORZ GTX LOCATION
TEXT OF PROMPT: Location: // <Enter>
TYPE OF PROMPT: pointer to a file//<Enter>
POINT TO WHICH FILE: HOSPITAL LOCATION//<Enter>
DESCRIPTION:
    1>The ward the patient is in or the clinic he is visiting.
    2><Enter>
EDIT Option: <Enter>
```

### **Yes/No Example**

```
Select Order Menu Management Option:  Enter/edit prompts
Select PROMPT: ORZ GTX YES/NO
Are you adding 'ORZ GTX YES/NO' as
    a new ORDER DIALOG? No// y YES
TEXT OF PROMPT: YES/NO PROMPT//<Enter>
TYPE OF PROMPT: yes/no//<Enter>
DESCRIPTION:
    No existing text
    Edit? NO// <Enter>
```

*Enter/edit Prompts, cont'd*

**Word-processing Example**

```
Select Order Menu Management Option: Enter/edit prompts
Select PROMPT: WORD-PROCESSING: ORZ GTX WORD-PROCESSING JG
Are you adding 'ORZ GTX WORD-PROCESSING JG' as
    a new ORDER DIALOG? No// y YES
TEXT OF PROMPT: Comment: // <Enter>
TYPE OF PROMPT: word processing// <Enter>
DESCRIPTION:
    No existing text
    Edit? NO// <Enter>
```

## Enter/edit Generic Orders

Generic order dialogs in CPRS serve the same function as generic text orders in OE/RR v 2.5. They define a patient's activities or document instructions to nursing or ward staff for the care of the patient. Text order protocols used in OE/RR are converted to the ORDER DIALOG (#101.41) file and can now be used in CPRS.

The process for creating new generic order dialogs in CPRS is quite different from the process used in the previous version. All generic order dialogs are created or modified using this option. When you create a new generic order dialog, you will be given the choice of copying an existing order dialog. A good guideline for creating most new generic order dialogs would be to copy the existing order dialog OR GXMISC GENERAL. This order dialog has the four basic prompts that make up a generic order: an orderable item, at least one comment-type prompt, a start date, and a stop date.

The following sequence shows:

- The process of creating a new generic order dialog that will assign the patient to a specific counseling group, ask the approximate date of the traumatic event, ask which days the group will meet, and ask whether the patient's family should participate.
- The prompts as they would be asked during an ordering session
- The help text for each prompt that the user is required to answer
- The appearance of the order once it becomes part of the patient record.

1. Select *Enter/edit generic orders* from the Order Menu Management menu.

```
OI      Enter/edit orderable items
PM      Enter/edit prompts
GO      Enter/edit generic orders
QO      Enter/edit quick orders
ST      Enter/edit order sets
AC      Enter/edit actions
MN      Enter/edit order menus
AO      Assign Primary Order Menu
CP      Convert protocols
SR      Search/replace components
LM      List Primary Order Menu

Select Order Menu Management Option: GO Enter/edit generic orders
```

2. Enter the generic order name. You can choose from the list of generic orders used at your site, or enter a new one.

☞ **NOTE:** The shaded fields in the example are only available to programmers with the @ as their Filemanager access code.

## *Creating or editing a generic order, cont'd*

```
Select Order Menu Management Option: GO Enter/Edit generic orders
Select ORDER DIALOG NAME: ORZ PATIENT COUNSELING
Are you adding 'ORZ PATIENT COUNSELING' as a new ORDER DIALOG? No// Y
(Yes)
  ORDER DIALOG DISPLAY GROUP: ??
  This field determines what display group this dialog has been defined
  for. It will define which orderable items are selectable with this dialog,
  as well as what service to send the order to when it is complete.
  Choose from:
    ACTIVITY
    ALL SERVICES
    ALLERGIES
    ANATOMIC PATHOLOGY
    .
    .
    .
  ORDER DIALOG DISPLAY GROUP: NURS  NURSING
  ORDERABLE ITEM: ??

  Choose from:
    AIR MATTRESS   Air Mattress
    ARTERIAL LINE  Arterial Line
    ARTERIAL SHEATH Arterial Sheath
    CALL HO ON    Call HO on
    .
    .

Do you wish to copy an existing order dialog? YES// <Enter>
Select ORDER DIALOG TO COPY: OR GXMISC GENERAL
Copying ...
NAME: ORZ PATIENT COUNSELING  Replace <Enter>
DISPLAY TEXT: ??
  The text of this dialog's name as it appears on a menu or subheader.
DISPLAY TEXT: Patient Counseling
SIGNATURE REQUIRED: ??
  This field indicates what signature will be required for orders
  created by this dialog, to be considered complete and ready to release to
  the service for action. If this flag is set to NO and the dialog contains a
  prompt for item(s) from the Orderable Item file, the order created may
  still require a signature if any of the items ordered are individually
  flagged as requiring a signature.
  Choose from:
    0      NONE
    1      ORELSE
    2      ORES
SIGNATURE REQUIRED: ORELSE
VERIFY ORDER: ??
  This field is a flag, which determines if the order created by this
  dialog will be presented to the user for verification before saving in the
  Orders file; for most quick orders, this flag should be set to 0 (no).
```

This is the point  
at which the copy  
takes place.



## Enter/edit generic orders, cont'd

Determines the prompting sequence.

Only seen with pointer-type prompts.

Only seen with pointer-type prompts.

This text will be question asked of users.

```

Choose from:
    1      YES
    0      NO
VERIFY ORDER: YES
ASK FOR ANOTHER ORDER: NO// ??
    This field allows the user to add another order from this dialog,
    when the initial order is accepted and placed; if set to YES, the user
    will be asked "Add another <dialog display text> order?" to allow for
    either exiting the processor or adding an additional order of the same
    type. This field can also be set to YES-DON'T ASK to force the processor
    to automatically drop into prompting for another order without asking
    first.
    Choose from:
        0      NO
        1      YES
        2      YES-DON'T ASK
ASK FOR ANOTHER ORDER: NO// <Enter>
DESCRIPTION:
This dialog will allow assignment of patient to a counseling group.
Edit? NO//
ENTRY ACTION:
EXIT ACTION:
VALIDATION: ??
    This is MUMPS code that will be executed at the time of releasing an
    order created with this dialog; dialog responses may be checked again
    here before releasing the order To the service.
VALIDATION:
ADDITIONAL TEXT: ??
    This is MUMPS code that will be executed when order ORIFN created by
    this dialog is about to be displayed; any string that should be appended
    to the order text should be returned in Y.
ADDITIONAL TEXT:

Select PROMPT: 1          ORZ GTX COUNSELING GROUP
SEQUENCE: 1//
PROMPT: ORZ GTX COUNSELING GROUP          pointer to a file
INDEX: ??
    For pointer-type prompts, this is the index to use when searching the
    file; it must be in the form of a regular cross-reference. To search on
    multiple indices, enter a string of index names separated by semi-colons,
    i.e."B;C"
INDEX: <Enter>
SCREEN: ??
    For pointer-type prompts, this field may contain MUMPS code that will
    be set into DIC("S") to screen the possible choices in the pointed-to
    file.
SCREEN:
SPECIAL LOOKUP ROUTINE: ??
    This field contains a routine to execute that will replace the
    standard DIC lookup for this prompt; it must be entered here as
    LINETAG;ROUTINE using a ; instead of ^ and where LINETAG is optional.
SPECIAL LOOKUP ROUTINE:
DISPLAY TEXT: ??
    This field allows the text that normally appears for this item to
    be replaced with alternate text for use in this dialog or menu.
DISPLAY TEXT: Choose group:
REQUIRED: ??
    This field indicates that the user must enter a response to this
    prompt.
    Choose from:
        1      YES
        0      NO
REQUIRED: YES

```

### *Enter/edit generic orders, cont'd*

```
MULTIPLE VALUED: ??
    This field determines if this prompt will be allowed to have multiple
    values, or be prompted for only once; if this prompt is a sub-dialog,
    the entire dialog will be asked once or many times, as a group.
    Choose from:
        1          YES
        0          NO
MULTIPLE VALUED: N NO
ASK ON EDIT ONLY: ??
    This field determines the behavior of the dialog driver for this
    prompt; if no value or the defined default is usually correct for this
    prompt, enter YES here to have this prompt skipped on the first pass
    through this dialog when creating an order.
    Choose from:
        1          YES
        0          NO
ASK ON EDIT ONLY: <Enter>
ASK ON ACTION: ??
    This field determines the behavior of the dialog driver for this
    prompt when taking a particular action on an order created by this dialog.
    If this string contains "R", this prompt will be asked when renewing an
    order if this string contains "C", this prompt will be asked when changing
    an order; if this string contains "W", this prompt will be asked when
    rewriting an order.
ASK ON ACTION: <Enter>
HELP MESSAGE: ??
    This field contains the help message to be presented when the user
    enters a question mark at this prompt.
HELP MESSAGE: Choose the event corresponding to the need for counseling.
                Replace
EXECUTABLE HELP: ??
    This is code that is to be executed when the user enters two or more
    question marks at this prompt.
EXECUTABLE HELP:
ASK ON CONDITION: ??
    This is MUMPS code that sets $T to determine if prompt should be asked
    or simply given a default value and presented to the user for acceptance
    or editing. For example, the prompt "Pregnant: " may have code here to
    check the sex of the current patient, i.e. I ORSEX="F" will allow it to
    be asked for female patients.
ASK ON CONDITION:
INPUT TRANSFORM: ??
    This is code that will be used as the third piece of DIR(0) when
    asking this prompt.
INPUT TRANSFORM:
DEFAULT: ??
    Choose from:
        DEPRESSION
        FAMILY COUNSELING
        FAMILY LOSS
        NEW PROSTHESIS
        PTSD
        UNEMPLOYMENT
DEFAULT: <Enter>
VALIDATION: ??
    This is code that will be executed after a response is entered to
    this prompt; if this prompt should be re-asked, kill the variable DONE.
    If execution of the ordering dialog should be stopped, set ORQUIT=1.
VALIDATION:
```

If there's no entry  
here, the prompt  
will only be asked  
on the screen if it  
fails  
VALIDATION  
logic.

Code will cause  
the prompt to  
assume the  
default.

### Enter/edit generic orders, cont'd

Useful for  
formatting the  
answer,  
especially dates  
and pointers.

If the response  
matches the entry  
here, any text and  
the response will  
be excluded.

Leading and  
trailing text can  
be up to 80  
characters.

```
ORDER TEXT SEQUENCE: ??
    This field indicates the order in which values will be concatenated
    together to build the order text; this may differ from the prompting
    sequence defined in the .01 Position field.
ORDER TEXT SEQUENCE: 1
FORMAT: ??
    This is a string of characters that will define any exceptions to how
    the external form of this value is generated. Possible values
    include:
        Pointer          -> Field number (default = .01)
        Set of Codes     -> 1 to return code instead of name
        Date/Time        -> Format string to pass $$FMTE^XLFD (default = 2)
        Suppress value   -> @
        Replace value    -> @<ptr> where ptr is the Dialog IEN of the prompt
                           whose value, when present, supersedes this
                           value
        Required value   -> *<ptr> where ptr is the Dialog IEN of the prompt
                           whose value is required to be present to
                           include this value
FORMAT:
OMIT TEXT: ??
    This is the external form of a value that is not to be included when
    building the order text. E.g. to include the urgency in the order text
    unless it is routine, enter "ROUTINE" here.
OMIT TEXT: <Enter>
LEADING TEXT: ??
    This field contains text that will be appended to the order text
    immediately in front of this value, e.g. "Instructions:." If this text
    is contained in a variable, enter @NAME where NAME is the variable name
LEADING TEXT: Assign patient to:
TRAILING TEXT: ??
    This field contains text that will be appended to the order text
    immediately following this value, e.g. "refills." If this text is
    contained in a variable, enter @NAME where NAME is the variable name
TRAILING TEXT: group
Select PROMPT: 2
SEQUENCE: 2//
PROMPT: ORZ GTX DATE OF EVENT                                date/time
DISPLAY TEXT: Date of event:
REQUIRED: NO// <Enter>
MULTIPLE VALUED: NO// <Enter>
ASK ON EDIT ONLY: <Enter>
.
.
.
ORDER TEXT SEQUENCE: 2
FORMAT:
OMIT TEXT: <Enter>
LEADING TEXT: following event on/about
TRAILING TEXT: <Enter>
Select PROMPT: 3
SEQUENCE: 3// <Enter>
PROMPT: ORZ GTX DAY OF WEEK                                set of codes
DISPLAY TEXT: Day group meets:
REQUIRED: NO// <Enter>
MULTIPLE VALUED: Y YES
MAX NUMBER OF MULTIPLES: ??
    This is the maximum number of values that may be entered for this
    prompt, if it is flagged as being multiple-valued. For example, a diet
    order may have up to 5 diet modifications entered, where 5 is the maximum
    allowed that would be entered here.
MAX NUMBER OF MULTIPLES: 3
```

### *Enter/edit generic orders, cont'd*

```
TITLE : ??
    This is text that will be used in place of the prompt when the order is
    displayed for place, edit, or cancel, or at the top of a multiple-valued
    prompt. The Display Text for the prompt will be used together with the
    instance number to prompt for user input; for example if Title="Lab Tests:"
    and Display Text="Test:" the user would see
        Lab Tests:
        1. Test:
        2. Test:
TITLE: Meeting Dates:
.
.
.
ORDER TEXT SEQUENCE: 3
FORMAT:
OMIT TEXT: <Enter>
LEADING TEXT: Group meets
TRAILING TEXT: .

Select PROMPT: 4
SEQUENCE: 4// <Enter>
PROMPT: ORZ GTX YES/NO                yes/no
DISPLAY TEXT: Family participation:
REQUIRED: NO// YES
MULTIPLE VALUED: <Enter>
.
.
.
ORDER TEXT SEQUENCE: 4
FORMAT:
OMIT TEXT: YES
LEADING TEXT: <Enter>
TRAILING TEXT: family participation.

Select PROMPT: 5
SEQUENCE: 5// <Enter>
PROMPT: ORZ GTX WP
DISPLAY TEXT: Comments:
REQUIRED: <Enter>
MULTIPLE VALUED: <Enter>
ASK ON EDIT ONLY: YES
ASK ON ACTION: <Enter>
HELP MESSAGE: <Enter>
XECUTABLE HELP:
ASK ON CONDITION:
INPUT TRANSFORM:
DEFAULT WORD-PROCESSING TEXT:
    No existing text
    Edit? NO// <Enter>
VALIDATION:
ORDER TEXT SEQUENCE: 5
FORMAT:
OMIT TEXT: <Enter>
LEADING TEXT: <Enter>
TRAILING TEXT: <Enter>

Select PROMPT: 6                OR GTX START DATE/TIME
SEQUENCE: 6//
PROMPT: OR GTX START DATE/TIME//                relative date/time
DISPLAY TEXT: Start date:
REQUIRED: NO// YES
```

This field is only  
asked for word-  
processing  
prompts.

### *Enter/edit generic orders, cont'd*

```
MULTIPLE VALUED: <Enter>
.
.
DEFAULT: "NOW"// <Enter>
VALIDATION:
ORDER TEXT SEQUENCE: <Enter>
FORMAT:
OMIT TEXT: <Enter>
LEADING TEXT: <Enter>
TRAILING TEXT: <Enter>

Select PROMPT: 7          OR GTX STOP DATE/TIME
SEQUENCE: 7// <Enter>
PROMPT: OR GTX STOP DATE/TIME// <Enter>          relative date/time
DISPLAY TEXT: Stop date:
REQUIRED: NO// <Enter>
MULTIPLE VALUED: <Enter>
.
.
.
DEFAULT: <Enter>
VALIDATION: I $$FTDCOMP^ORCD("START DATE/TIME","STOP DATE/TIME",>) K DONE
W $(7),!,"  Cannot end before start date/time!",!  Replace
ORDER TEXT SEQUENCE: <Enter>
FORMAT:
OMIT TEXT: <Enter>
LEADING TEXT: <Enter>
TRAILING TEXT: <Enter>
```

This code will assure that the stop date is valid with the start date.

### **Ordering this Generic order from an Add Order Menu**

```
Select Item(s): Next Screen// Patient Counseling

                                -- Patient Counseling --

Choose group: PTSD
Date of event: 1991  (1991)
Day group meets: Wednesday
Another Day group meets: Friday
Another Day group meets: <Enter>
Family participation: NO
Start date: NOW// <Enter>
Stop date: T+60  (NOV 01, 1997)

-----
                Orderable Item: PATIENT COUNSELING
                  Choose group: PTSD
                  Date of event: 1991
                  Meeting Dates: Wednesday
                              Friday
Family participation: NO
                  Start date: NOW (9/2/97@13:10)
                  Stop date: T+60 (11/1/97)
-----

(P)lace, (E)dit, or (C)ancel this order? PLACE// <Enter>
... order placed.
```

This verification box will only be presented to the user when the VERIFY ORDER FIELD IS SET to yes.

This dialog will create an order with the order text as follows on the next page, depending on the answer to the question regarding family participation.

### *Enter/edit generic orders, cont'd*

#### **Order text created when answering NO to the family participation question:**

```
>> Assign patient to PTSD group following event on/about 1991 . Group  
meets Wednesday, Friday . NO family participation.
```

#### **Order text created when answering YES to the family participation question:**

```
>> Assign patient to PTSD group following event on/about 1991 .  
Group meets Wednesday, Friday
```

### **General Information**

- 1) The use of an orderable item in each generic order is advised, as it will allow ordering statistics to be gathered. The orderable item is stored in the ORDER (#100) file and cross referenced to facilitate gathering of such statistics
- 2) Spaces are not required at the beginning or end of the leading or trailing text, the dialog driver will insert them.
- 3) Generic orders may use a start date and stop date. There are existing prompts that are a start date (OR GTX START DATE ), stop date (OR GTX STOP DATE), start date/time (OR GTX START DATE/TIME) and stop date/time (OR GTX STOP DATE/TIME). We recommend that you use the existing prompts, as they already contain validation code to ensure proper date and/or time input. Defaults may also be entered for the start date or stop date on each generic order dialog.
- 4) **NOTE:** No changes are saved until PLACE is selected.

## Enter/Edit Quick Orders

Quick orders in CPRS have the same functionality as they did in OE/RR V. 2.5—they speed up the ordering process by predefining many of the answers that a user would normally have to type in while placing orders.

The process for creating quick orders has been standardized with this option. In OE/RR v 2.5, quick orders for Radiology, Inpatient Medications, Vitals, and Consults were created using an option in those packages. Lab and Dietetics quick orders required programmer level access. With CPRS, quick orders for all packages are created and edited using this option; no special VA FileManager access is required.

The dialog presented while creating quick orders varies, depending on the package associated with the quick order. The dialog is very similar to what is seen while actually placing an order for that package. In addition, you may indicate for each quick order if the ordering person will be allowed/should be required to review and verify the order before accepting.

A major advantage in CPRS is that quick orders can be edited. As was the recommendation in OE/RR v 2.5, the creation of quick orders for any package should be done in coordination with the application coordinator for that service. It is also a good practice to create quick orders based on real need instead of anticipated need. Once created, the quick orders can be placed on any appropriate order menu.

### Namespacing

Quick Orders should follow a consistent naming convention. Starting each quick order name with a consistent set of letters will make the quick orders easy to identify, easy to organize, and prevent creation of duplicates.

#### *Recommended Guidelines for naming quick orders:*

1. Append a Z to the end of the exported namespace for each package
2. Make the name of the quick order as descriptive as possible. The name of the quick order should contain the name of the orderable item and should include reference to as many of the defined prompts as possible (e.g., RAZ CHEST 2 VIEWS STAT PORTABLE).
3. Quick Order names should be unique within the first 30 characters.

## Exported package namespaces

- |                              |      |
|------------------------------|------|
| • Consult/Request Tracking   | GMRC |
| • Dietetics                  | FH   |
| • IV Medications             | PSJI |
| • Laboratory                 | LR   |
| • Radiology/Nuclear Medicine | RA   |
| • Outpatient Medications     | PSO  |
| • Unit Dose Medications      | PSJ  |
| • Vital Measurements         | GMRV |

## Protocol conversion of quick orders

Most of the protocols that aren't converted with the installation of this pre-release package are quick orders that have been created locally with entry and exit action code. This option lets you recreate them, or complete those quick orders that didn't fully convert.

1. Select *Enter/edit quick orders* from the Order Menu Management menu.

```
Select Option: Order Menu Management
  OI      Enter/edit orderable items
  PM      Enter/edit prompts
  GO      Enter/edit generic orders
  QO      Enter/edit quick orders
  ST      Enter/edit order sets
  AC      Enter/edit actions
  MN      Enter/edit order menus
  CP      Convert protocols
  SR      Search/replace components
  LM      List Primary Order Menu
You have PENDING ALERTS
      Enter "VA VIEW ALERTS      to review alerts
Select Order Menu Management Option: QO Enter/edit quick orders
```

2. Enter the order dialog name. You can choose from a list of quick orders used at your site, or create a new one.

```
Select QUICK ORDER DIALOG NAME: ??
Choose from:
  FHWN1
  FHWN2
  GMRVORADMIT V/M
  GMRVORB/P
  GMRVORHT
  GMRVORPULSE
  GMRVORRESP
  GMRVORTEMP
  GMRVORTPR
  GMRVORTPR B/P
  GMRVORWT
  OR GXACTV AD LIB
  OR GXACTV AMBULATE
  OR GXACTV AMBULATE TID
  OR GXACTV BATHROOM PRIVILEGES
  OR GXACTV BED REST
  OR GXACTV BED REST / BRP
  OR GXACTV HOB UP
```



***Enter/edit quick orders, cont'd***

```
OR GXACTV MAY LEAVE WARD
OR GXACTV OUT OF BED
OR GXACTV PROVIDE TRAPEZE
OR GXACTV ROM EXERCISE
OR GXACTV TURN PATIENT
OR GXACTV UP IN CHAIR
OR GXACTV UP IN CHAIR TID
OR GXHEMO ARTERIAL LINE
OR GXHEMO ARTERIAL SHEATH
OR GXHEMO CARDIAC OUTPUT
OR GXHEMO HEMODYNAMICS ITEM
OR GXHEMO SWAN GANZ CATHETER
OR GXHEMO VENOUS SHEATH
OR GXNURS CHEST TUBE
OR GXNURS GLASCOW COMA
OR GXNURS GUAIAC ASPIRATE
OR GXNURS GUAIAC EMESIS
OR GXNURS GUAIAC STOOLS
OR GXNURS NEURO CHECK
OR GXNURS NURSING ITEM
OR GXNURS PUSH FLUIDS
OR GXNURS URINE PH
OR GXNURS URINE SPEC GRAV
OR GXOXGN MASK 35 PER CENT
OR GXOXGN MASK 40 PER CENT
OR GXOXGN MASK 50 PER CENT
OR GXOXGN O2 3 LT NASAL CANNUL
OR GXOXGN O2 4 LT NASAL CANNUL
OR GXOXGN OXYGEN THERAPY ITEM
OR GXOXGN VENTILATOR
OR GXPARM I AND O
OR GXRESP CHEST PT
OR GXRESP INCENTIVE SPIROMETER
OR GXRESP RESPIRATORY ITEM
OR GXRESP SUCTION
OR GXRESP TCDB
OR GXRESP TRACH CARE
OR GXSKIN AIR MATTRESS
OR GXSKIN COLD PACKS
OR GXSKIN SHEEPSKIN
OR GXSKIN SKIN AND WOUND ITEM
OR GXSKIN WARM PACKS
OR GXSKIN WARM SOAKS
OR GXSKIN WATER MATTRESS
OR GXTUBE COLOSTOMY
OR GXTUBE CONDOM CATHETER
OR GXTUBE DRAINS ITEM
OR GXTUBE HEMOVAC
OR GXTUBE ILEOSTOMY
OR GXTUBE INDWELLING URINARY C
OR GXTUBE JACKSON PRATT
OR GXTUBE NASOGASTRIC
OR GXTUBE PENROSE
OR GXTUBE RECTAL TUBE
OR GXTUBE SUPRAPUBIC CATHETER
OR GXTUBE UROSTOMY
You may enter a new ORDER DIALOG, if you wish
Answer must be 3-63 characters in length.
```

## Enter/edit quick orders, cont'd

### Consults Quick Order Example

Currently the only way to stuff the defined reason for Request and not prompt to edit is to set GMRCREAF=1 in the entry action in file 101.41

Currently the only way to eliminate the prompts for Attention or Provisional Diagnosis while ordering is to set GMRCNOAT=1 or GMRCNOPD=1 respectively in the ENTRY ACTION of the quick order in file 101.41

```
Select Order Menu Management Option: QO Enter/edit quick orders
Select QUICK ORDER NAME: GMRCZ EKG STAT ER
  Are you adding 'GMRCZ EKG STAT ER' as a new ORDER DIALOG? No// Y (Yes)
TYPE OF QUICK ORDER: CONSULTS
NAME: GMRCZ EKG STAT ER// <Enter>
DISPLAY TEXT: Stat EKG
VERIFY ORDER: <Enter>
DESCRIPTION:
  1> <Enter>
ENTRY ACTION: <Enter>

Consult to Service/Specialty: CARDIOLOGY
  1 CARDIOLOGY
  2 CARDIOLOGY CLINIC
CHOOSE 1-2: 1 CARDIOLOGY
Reason for Request:
  1>r/o MI and arrhythmia
  2>
EDIT Option: <Enter>
Category: OUTPATIENT
Urgency: STAT
Place of Consultation: EMERGENCY ROOM
Attention: <Enter>
Provisional Diagnosis: <Enter>

-----
Consult to Service/Specialty: CARDIOLOGY
      Reason for Request: r/o MI and arrhythmia
              Category: OUTPATIENT
              Urgency: STAT
      Place of Consultation: Emergency Room
-----

(P)lace, (E)dit, or (C)ancel this quick order? PLACE// <Enter>

Select QUICK ORDER NAME: <Enter>
```

☞ NOTE: No changes are saved until PLACE is selected.

## Diet Quick Order Example

```
Select QUICK ORDER NAME: OR FHWN3
  Are you adding 'OR FHWN3' as a new ORDER DIALOG? No// Y (Yes)
TYPE OF QUICK ORDER: DIET
  1    DIET ADDITIONAL ORDERS
  2    DIET ORDERS
CHOOSE 1-2: 2
DISPLAY TEXT: Junk Food
VERIFY ORDER: ?
  Enter YES to have orders created by this dialog presented to the
  user before saving, with the opportunity to edit.
  Choose from:
    1      YES
    0      NO
VERIFY ORDER: 0 NO
DESCRIPTION:
  1>Junk food consists of a double Mac cheeseburger with fries and
  2>a coke, available whenever the patient requests it.
  3> <Enter>
EDIT Option: <Enter>
Diets:
  1. Diet: ?
  Choose from:
    DIRT    HIGH MINERAL
    HIGH MINERAL    HIGH MINERAL
    REGULAR    REGULAR
  Enter a diet modifications to be ordered for this patient.
  1. Diet: High Mineral
  Effective date/time: NOW// <Enter>
  Expiration date/time: <Enter>
  Delivery: TRAY// <Enter>
  Special Instructions: <Enter>
-----
                        Diets: HIGH MINERAL
                        Effective date/time: NOW
                        Delivery: TRAY
                        Special Instructions: Always be polite (don't say "You shouldn't
-----
(P)lace, (E)dit, or (C)ancel this quick order? PLACE// <Enter>
Select QUICK ORDER DIALOG NAME: <Enter>
```

Up to five  
modifications  
are allowed.

## IV Medications Quick Order Example

```
Select Order Menu Management Option:  Enter/edit quick orders

Select QUICK ORDER NAME:  PSJZ AMINOPH 1GM
  Are you adding 'PSJZ AMINOPH 1GM' as a new ORDER DIALOG? No// Y  (Yes)
TYPE OF QUICK ORDER:  IV MEDICATIONS
NAME:  PSJZ AMINOPH 1GM// <Enter>
DISPLAY TEXT:  Aminophylline drip
VERIFY ORDER:  NO// <Enter>
DESCRIPTION:
  No existing text
  Edit? NO// <Enter>

Solution:      D5W INJ,SOLN IV
Volume (in ml): 50// 1000
Additive:  AMINOPHYLLINE INJ,SOLN IV      AMINOPHYLLINE INJ,SOLN IV
AMINOPHYLLINE
INJ,SOLN IV
  (Units for this additive are MG)

Strength: 1000
Another Additive: <Enter>
Infusion Rate: 10
Priority: ROUTINE// <Enter>Provider Comments:
  1> Titrate to effect.
  2> <Enter>
Edit OPTION: <Enter>

-----
              Solutions: D5W INJ,SOLN IV 1000 ml
              Additives: AMINOPHYLLINE INJ,SOLN IV 1000 MG
              Infusion Rate: 10 ml/hr
              Priority: ROUTINE
              Provider Comments: Titrate to effect.
-----

(P)lace, (E)dit, or (C)ancel this quick order? PLACE//<Enter>
```

## Lab Quick Order Example

```
Select QUICK ORDER NAME: LR GLUCOSE
NAME: LR GLUCOSE// <Enter>
DISPLAY TEXT: GLUCOSE// <Enter>
VERIFY ORDER: NO// <Enter>
DESCRIPTION:
  1><Enter>
ENTRY ACTION: <Enter>

Lab Test: GLUCOSE// <Enter>
SEND TO LAB - Means the patient is ambulatory and will be sent to the
Laboratory draw room to have blood drawn.
WARD COLLECT - Means that either the physician or a nurse will be
collecting the sample on the ward.
LAB BLOOD TEAM - Means the phlebotomist from Lab will draw the blood on
the ward. This method is limited to laboratory defined collection times.

      SP      Send patient to lab
      WC      Ward collect & deliver
      LC      Lab blood team
Collected By: SP Send patient to lab
Is BLOOD MARBLED TOP the correct sample to collect? Yes// <Enter> YES
Collection Date/Time: N (JUN 18, 1997@14:11)
Enter Order Comment: <Enter>

-----
                Lab Test: GLUCOSE
                Collected By: Send patient to lab
                Collection Sample: BLOOD
                Specimen: SERUM
                Collection Date/Time: NOW
-----
(P)lace, (E)dit, or (C)ancel this quick order? PLACE//<Enter>
```

## Outpatient Medications Quick Order Example

Selection of a dispense drug is not required, but order checking will not occur unless one is defined.

```
Select Order Menu Management Option:  Enter/edit quick orders

Select QUICK ORDER NAME:  PSO DIGOXIN QD
Are you adding 'PSO DIGOXIN QD' as a new ORDER DIALOG? No// Y  (Yes)
TYPE OF QUICK ORDER:  OUTPATIENT MEDICATIONS
NAME:  PSO DIGOXIN QD//  <Enter>
DISPLAY TEXT:  Digoxin QD (opt)
VERIFY ORDER:  <Enter>
DESCRIPTION:
  No existing text
  Edit? NO//  <Enter>

Medication:  DIGOXIN TAB

Choose from:
  1 DIGOXIN 0.125MG TAB    $0.210
  2 DIGOXIN 0.25MG TAB TAB $0.114
Dispense Drug:  2    DIGOXIN 0.25MG TAB TAB    $0.114
Complex dose? NO//  <cr>
Take (in TABLET(S)):  1
Route:  ORAL//  <Enter>
Schedule:  QD

Limit duration to (in DAYS):  30
Quantity:  30
Refills (0-11):  1
Pick Up:  WINDOW//  <Enter>
Provider Instructions:
  No existing text
  Edit? No//  <Enter> (No)
Priority:  ROUTINE//  <Enter>

-----
      Medication:  DIGOXIN TAB
      Dispense Drug:  DIGOXIN 0.25MG TAB
      Take:  1 TABLET(S) ORAL QD for 30 days
      Quantity:  30
      Refills (0-11):  1
      Pick Up:  WINDOW
      Priority:  ROUTINE
      SC:  NO
-----

(P)lace, (E)dit, or (C)ancel this quick order? PLACE//  <Enter>
```

## Radiology Quick Order Example

```

Select Order Menu Management Option:  Enter/edit quick orders

Select QUICK ORDER NAME:  RAZ CHEST 2 VIEWS STAT TODAY
Are you adding 'RAZ CHEST 2 VIEWS STAT TODAY' as a new ORDER DIALOG? No// Y
(Yes)
TYPE OF QUICK ORDER:  IMAGING
NAME:  RAZ CHEST 2 VIEWS STAT TODAY  Replace
DISPLAY TEXT:  Stat Chest 2 views
VERIFY ORDER:  N  NO
DESCRIPTION:
    1> <Enter>
    Edit OPTION:  <Enter>
Select one of the following imaging types:
    NUCLEAR MEDICINE
    GENERAL RADIOLOGY

Select IMAGING TYPE:  GENERAL RADIOLOGY

Common General Radiology Procedures:
    1 ABDOMEN 1 VIEW                21 FOOT 3 OR MORE VIEWS
    2 ABDOMEN 2 VIEWS              22 FOREARM 2 VIEWS
    3 ANKLE 3 OR MORE VIEWS        23 HAND 3 OR MORE VIEWS
    4 CALCANEUS 2 VIEWS            24 HIP 1 VIEW
    5 CHEST 2 VIEWS PA&LAT          25 HUMERUS 2 OR MORE VIEWS
    6 CHEST SINGLE VIEW            26 KNEE 3 VIEWS
    7 CHOLECYSTOGRAM ORAL CONT     27 NASAL BONES MIN 3 VIEWS
    8 COLON AIR CONTRAST            28 NON-INVAS.,DUPLEX SCAN OF CRAN
    9 COLON BARIUM ENEMA           29 PELVIS 1 VIEW
    10 CT ABDOMEN W/O CONT          30 RIBS UNILAT 2 VIEWS
    11 CT CERVICAL SPINE W/O CONT   31 SHOULDER 2 OR MORE VIEWS
    12 CT HEAD W/O CONT             32 SINUSES 3 OR MORE VIEWS
    13 CT LUMBAR SPINE W/O CONT     33 SKULL 4 OR MORE VIEWS
    14 CT MAXILLOFACIAL W/O CONT    34 SPINE CERVICAL MIN 4 VIEWS
    15 CT NECK SOFT TISSUE W/O CONT 35 SPINE LUMBOSACRAL MIN 2 VIEWS
    16 CT THORAX W/O CONT           36 SPINE THORACIC 2 VIEWS
    17 ELBOW 3 OR MORE VIEWS        37 TIBIA & FIBULA 2 VIEWS
    18 ESOPHAGUS                   38 UPPER GI AIR CONT W/O KUB
    19 ESOPHAGUS RAPID SEQUENCE FILMS 39 UROGRAM IV W NEPHROTOMOGRAMS
    20 FEMUR 2 VIEWS               40 WRIST 3 OR MORE VIEWS

Radiology Procedure: 5  CHEST 2 VIEWS PA&LAT
Modifier:
History and Reason for Exam:
    1>      R/O pneumonia or mass.
    2>      <Enter>
    Edit OPTION:  <Enter>

Category:  <Enter>
Is this patient scheduled for pre-op? NO// <Enter>
Date Desired: TODAY// T  (AUG 30, 1997)
Mode of Transport:  P  PORTABLE
Is patient on isolation procedures? <Enter>
Urgency:  ROUTINE//  STAT
Submit request to:  TUSCALOOSA VAMC
-----
Radiology Procedure:  CHEST 2 VIEWS PA&LAT
History and Reason for Exam:  R/O pneumonia or mass.
Date Desired:  NOW
Mode of Transport:  PORTABLE
Urgency:  STAT
Submit request to:  TUSCALOOSA VAMC
-----
(P)lace, (E)dit, or (C)ancel this quick order? PLACE//  <Enter>

```

The Common Procedure list for the selected Imaging Type will be displayed.

If Category is left blank, the current patient status will be assumed.

Submit Request to: can be left blank to allow the user to direct the request to the correct imaging location.

## Unit Dose Medications Quick Order Example

```
Select Order Menu Management Option:  Enter/edit quick orders

Select QUICK ORDER NAME:  PSJZ CIMETIDINE
Are you adding 'PSJZ CIMETIDINE ' as a new ORDER DIALOG? No// Y  (Yes)
TYPE OF QUICK ORDER:  UNIT DOSE MEDICATIONS
NAME: PSJZ CIMETIDINE // <Enter>
DISPLAY TEXT:  Tagamet q8h
VERIFY ORDER:  <Enter>
DESCRIPTION:
1>  <cr>
Edit OPTION:  <Enter>

Medication:  CIMETIDINE TAB

Choose from:
1 CIMETIDINE 200MG TAB UD PK  $0.018
2 CIMETIDINE 300MG TAB UD PK  $0.107
3 CIMETIDINE 400MG TAB UD TAB  $0.251
Dispense Drug:  CIMETIDINE 200MG TAB UD PK  $0.018  U.D.
Dosage:  200mg
Route: ORAL// <Enter>
Schedule:  Q8H
Priority: ROUTINE//  <Enter>
Provider Comments:
No existing text  Edit? No// <Enter>  (No)
-----
Medication: CIMETIDINE TAB
Dispense Drug: CIMETIDINE 200MG TAB UD
Dosage: 200mg
Route: ORAL
Schedule: Q8H
Priority: ROUTINE
-----
(P)lace, (E)dit, or (C)ancel this quick order? PLACE//  <Enter>
```

Selection of a  
dispense drug is  
not required, but  
order checking  
will not occur  
unless one is  
defined.



## Vital Measurements Quick Order Example

```
Select Order Menu Management Option:  Enter/edit quick orders

Select QUICK ORDER NAME: GMRVZ BP
  Are you adding 'GMRVZ BP' as a new ORDER DIALOG? No// Y (Yes)
TYPE OF QUICK ORDER: VITALS/MEASUREMENTS
NAME: GMRVZ BP// <Enter>
DISPLAY TEXT: BP Q4h
VERIFY ORDER: <Enter>
DESCRIPTION:
1>      <Enter>
  Edit OPTION: <Enter>

Vital Sign: B/P      B/P
Start Date/Time: NOW
Schedule: Q4H
Stop Date/Time: NOW
Special Instructions: <cr>

-----
                Vital Sign: B/P
                Start Date/Time: NOW
                Schedule: Q4H
                Stop Date/Time: NOW
-----

(P)lace, (E)dit, or (C)ancel this quick order? PLACE// EDIT
Vital Sign: B/P// <Enter>
Start Date/Time: NOW// <Enter>
Schedule: Q4H// <Enter>
Stop Date/Time: NOW// @
  Are you sure you want to delete this value? NO// YES
Special Instructions: <Enter>

-----
                Vital Sign: B/P
                Start Date/Time: NOW
                Schedule: Q4H
-----

(P)lace, (E)dit, or (C)ancel this quick order? PLACE// <Enter>
```

The dialog will  
be repeated  
after first  
editing the  
quick order if  
EDIT is chosen.

## Enter/Edit Order Sets

This option lets you add or edit order sets. Order sets are groups of quick orders that are commonly ordered together for certain situations, such as pre-admission, pre-operative, etc. The sets can be created through this option by selecting quick orders from all services. Then when you enter the order screens for CPRS, you can pick an order set by the name you gave it in this option.

☞ **NOTE:** Order Sets in CPRS are slightly different than they were in OE/RR v 2.5. In version 2.5, order sets could be of the protocol menu type where ordering items could be grouped and the user would choose which items to order from that menu. Order sets could also be extended action type protocols which ordered all of the items upon choice of the order set. CPRS considers all order sets to be extended action types and doesn't prompt the user for the items contained within.

### 1. Select *Enter/edit order sets* from the Order Menu Management menu

```
OI      Enter/edit orderable items
PM      Enter/edit prompts
GO      Enter/edit generic orders
QO      Enter/edit quick orders
ST      Enter/edit order sets
AC      Enter/edit actions
MN      Enter/edit order menus
AO      Assign Primary Order Menu
CP      Convert protocols
SR      Search/replace components
LM      List Primary Order Menu

You have PENDING ALERTS
      Enter  "VA    VIEW ALERTS      to review alerts

Select Order Menu Management Option: st Enter/edit order sets
```

### 2. Enter an order set name (either a pre-existing one or a new one).

```
Select ORDER SET NAME: ??
Answer with ORDER DIALOG NAME
Do you want the entire ORDER DIALOG List? Y (Yes)
Choose from:
  ORZ GMENU AD PROTOCOL
  ORZ GMENU ROPES COURSE VERBAL
  ORZ GMENU SLIDING SCALE INSULI
  ORZ GMENU URINE DRUGS OF ABUSE
  ORZ GSET MAURI
  ORZ GXTEXT NPO AT MN X MEDS
  ORZ GXTEXT NPO X MEDS
  PSJQOS ACET PO/PR
  PSJQOS ACETPO/PR
  PSJQOS ADMIT 3ET
  PSJQOS ADMIT 61C
Press RETURN to continue or ^ to exit: ^
You may enter a new ORDER DIALOG, if you wish
```

### *Enter/edit order sets, cont'd*

```
Select ORDER SET NAME: ZZPRE-OP
  Are you adding 'ZZPRE-OP' as a new ORDER DIALOG? No// Y (Yes)
Do you wish to copy an existing order set? YES// NO
NAME: PRE-OP//<Enter>
DISPLAY TEXT: Pre-Operative Order Set
DESCRIPTION:
  1>A set of standard orders for patients prior to surgery
  2><Enter>
EDIT Option:<Enter>
```

### **3. Enter the items you want to include in the order set.**

```
Select ORDER SET COMPONENT: ?
  This field specifies the order in which this item will be displayed
  or processed.
Select ORDER SET COMPONENT: 1
SEQUENCE: 1//<Enter>
ITEM: ADMIT PATIENT OR GXMOVE ADMIT PATIENT

Select ORDER SET COMPONENT: 2
SEQUENCE: 2//<Enter>
ITEM: LRTZ CHEM 7

Select ORDER SET COMPONENT: 3
SEQUENCE: 3//<Enter>
ITEM: ACETOMENOPHINE??
  Enter an order dialog; a dialog that is an ancestor may not also be a
  sub-item.
  Answer with ORDER DIALOG NAME, or DISPLAY TEXTITEM: ??

  This field points to an order dialog which is subordinate to this.
  dialog NOTE: The parent dialog menu or one of its ancestors may not
  be entered as an item.

ITEM: ORWD GENERIC VITALS

Select ORDER SET COMPONENT: 4
SEQUENCE: 4//<Enter>
ITEM: <Enter>
```

## Enter/Edit Actions

This option provides the equivalent of a feature of OE/RR 2.5 that allowed sites to have access to a protocol's entry or exit actions. This enables you to add Surgery or other programs to a CPRS menu.

☛ **NOTE:** This option is intended for programmers who can modify M code.

```
OI      Enter/edit orderable items
PM      Enter/edit prompts
GO      Enter/edit generic orders
QO      Enter/edit quick orders
ST      Enter/edit order sets
AC      Enter/edit actions
MN      Enter/edit order menus
AO      Assign Primary Order Menu
CP      Convert protocols
SR      Search/replace components
LM      List Primary Order Menu

You have PENDING ALERTS
        Enter "VA  VIEW ALERTS      to review alerts

Select Order Menu Management Option: AC Enter/edit actions
Select ACTION NAME: ?
Answer with ORDER DIALOG NAME
Do you want the entire ORDER DIALOG List? Y  (Yes)
Choose from:
  LRX NEW COLLECTION TYPE
  LRX NEW TIME
  ZDGOERR TRANSFER

        This is the name of the dialog; entries that were converted from the
        Protocol file will retain the same name.  Namespacing is not required,
        but still encouraged.
        You may enter a new ORDER DIALOG, if you wish
        Answer must be 3-63 characters in length.
Select ACTION NAME: ZDGOERR TRANSFER
NAME: ZDGOERR TRANSFER// <Enter>
DISPLAY TEXT: TRANSFER PATIENT// <Enter>
ENTRY ACTION: D SAVE^ORXD S DGPMPT=2 D LO^DGUTL,OREN^DGPMV K VAINDT D
INP^VADPT,R
EAD^ORUTL
        Replace <Enter>
EXIT ACTION: K DGPMASIH D RSTR^ORXD  Replace <Enter>
DESCRIPTION:
  1<Enter>

Select ACTION NAME: <Enter>
```

## Enter/Edit Order Menus

Use this option to edit the items on an existing order menu or to create new order menus. Order menus you create here will be available to your users in both the List Manager and GUI interfaces when you assign them as primary order menus.

Order Menus in CPRS are just one type of Order dialog.

All add order menus in CPRS are order menus. Add order menus in CPRS allow great customization. In addition to adding, deleting, and editing items, you now have the ability to insert headers or titles to further organize the ordering items. You may add or delete rows as well and you can define the exact position of a specific item, as opposed to items shifting when an item is inserted.

To make order menus as friendly to users as possible, you should try to keep the length of the menu to 17 rows. When the menu is displayed to users, they will only be able to see the first 17 rows of a menu on the first page. Longer menus force users to scroll to the next screen to see all of the available items. This can lead to frustration and mistakes by new users because order items are “hidden” from view.

☞ **NOTE:** In OE/RR v 2.5, order sets could be created by using the protocol menu type, which allowed the selection of items to be ordered. In CPRS, these order sets are now order menus and allow the same customization as described above.

☞ **NOTE:** We recommend that you add “Z” or your local namespace to new items that you create. This isn’t required, but it helps for distinguishing local changes from exported items.

### 1. Select Enter/edit order menus from the CPRS Implementation Menu.

```
Select Option: Order Menu Management Option

OI      Enter/edit orderable items
PM      Enter/edit prompts
GO      Enter/edit generic orders
QO      Enter/edit quick orders
ST      Enter/edit order sets
AC      Enter/edit actions
MN      Enter/edit order menus
AO      Assign Primary Order Menu
CP      Convert protocols
SR      Search/replace components
LM      List Primary Order Menu

You have PENDING ALERTS
Enter "VA VIEW ALERTS to review alerts

Select Order Menu Management Option: mn Enter/edit order menus
```

### *Enter/edit order menus, cont'd*

2. Select an existing menu to add items to or enter the name of a new menu.

```
Select ORDER MENU: ?  
Answer with ORDER DIALOG NAME  
Do you want the entire ORDER DIALOG List? Y (Yes)  
Choose from:  
  FHWMENU  
  GMRVORMENU  
  OR ADD MENU CLINICIAN  
  OR GMENU ACTIVITY ORDERS  
  OR GMENU ORDER SETS  
  OR GMENU OTHER ORDERS  
  OR GMENU PATIENT CARE ORDERS  
  OR GXMOVE PATIENT MOVEMENT  
  
  You may enter a new ORDER DIALOG, if you wish  
  Answer must be 3-63 characters in length.  
Select ORDER MENU: ORZ ADD MENU CLINICIAN
```

3. The menu editor appears. Choose an action (add items, remove items, edit items, etc.). Note that the menu editor has horizontal and vertical coordinates. These let you specify where on the menu to place items.

### **Clinician Menu Example**

1. Select Enter/edit order menus, then enter ORZ ADD MENU CLINICIAN.

```
Select Order Menu Management Option: mn Enter/edit order menus  
Select ORDER MENU: ORZ ADD MENU CLINICIAN
```

2. After the Menu Editor screen appears, select Add to add items, then select Menu, to add menu items.

Enter/edit order menus, cont'd

### Clinician Menu Example

The + sign represents every 5 rows and the numbers 1,2,3,4,etc. represent rows 10,20,30, 40,etc.

<b>Menu Editor</b>		Jul 15, 1997 14:01:13	Page: 1 of 1
Menu: ORZ ADD MENU CLINICIAN		Column Width: 26	
1	2	3	4
0 ORDER SETS...	30 PATIENT CARE...	70 LABORATORY...	
1 Patient Movement	31 Condom Catheter	71 Chem 7	
2 Diagnosis	32 Guaiac Stools	72 T&S	
3 Condition	33 Incentive Spirometer	73 Glucose	
+4 Allergies	34 Dressing Change	74 CBC w/Diff	
		75 PT	
10 PARAMETERS...	40 DIETETICS...	76 PTT	
11 TPR B/P	41 Regular Diet	77 CPK	
12 Weight	42 Tubefeeding	78 CPK	
113 I & O	43 NPO at Midnight	79 LDH	
14 Call HO on		80 Urinalysis	
	50 IV FLUIDS...	81 Culture & Suscept	
20 ACTIVITY...	51 OUTPATIENT MEDS...		
21 Ad Lib	55 INPATIENT MEDS...	90 OTHER ORDERS...	
+23 Bed Rest / BRP		91 EKG: Portable	
24 Ambulate TID	60 IMAGING ...		
25 Up in Chair TID	61 Chest 2 views PA&LAT	99 Text Only Order	
+ Next Screen - Prev Screen ?? More Actions >>>			
Add ...	Edit ...	Assign to User(s)	Select New Menu
Remove ...	Toggle Display	Order Dialogs ...	Quit
Select Action: Quit//			

These numbers represent the columns created when you select a column width of 26.

These are the actions available for menu management

3. Answer the following prompts about the new orderable.

```

Select Action: Quit// A Add Items

Menu Items          Text or Header          Row

Add: M
ITEM: ORZ GXACTV EXERCISE
ROW: 17
COLUMN: 1
DISPLAY TEXT: Exercise
MNEMONIC: 25
ITEM: <Enter>
Rebuilding menu display ...
  
```

*Enter/edit order menus, cont'd*

4. The new menu appears with your new item on it. You can now perform any of the actions listed below: Add another item, remove an item, edit, toggle display (to show the technical name of the item; e.g., ORZ GXACTV, instead of the menu text), assign to User(s), etc.

<b>Menu Editor</b>		Jul 15, 1997 14:01:13	Page: 1 of 1
Menu: OR ADD MENU CLINICIAN		Column Width: 26	
1	2	3	4
0 ORDER SETS...	30 PATIENT CARE...	70 LABORATORY...	
1 Patient Movement	31 Condom Catheter	71 Chem 7	
2 Diagnosis	32 Guaiac Stools	72 T&S	
3 Condition	33 Incentive Spirometer	73 Glucose	
+4 Allergies	34 Dressing Change	74 CBC w/Diff	
		75 PT	
10 PARAMETERS...	40 DIETETICS...	76 PTT	
11 TPR B/P	41 Regular Diet	77 CPK	
12 Weight	42 Tubefeeding	78 CPK	
13 I & O	43 NPO at Midnight	79 LDH	
14 Call HO on		80 Urinalysis	
	50 IV FLUIDS...	81 Culture & Suscept	
20 ACTIVITY...	51 OUTPATIENT MEDS...		
21 Ad Lib	55 INPATIENT MEDS...	90 OTHER ORDERS...	
+23 Bed Rest / BRP		91 EKG: Portable	
24 Ambulate TID	60 IMAGING ...		
25 Exercise	61 Chest 2 views PA&LAT	99 Text Only Order	
<b>+ Next Screen - Prev Screen ?? More Actions &gt;&gt;&gt;</b>			
Add ...	Edit ...	Assign to User(s)	Select New Menu
Remove ...	Toggle Display	Order Dialogs ...	Quit
Select Action: Quit// A Add Items			



- 1. Select Enter/edit order menus, then enter FHMENUZ for Dietetics.**

```
Select Order Menu Management Option: mn Enter/edit order menus
Select ORDER MENU: FHMENUZ
```

2. After the Menu Editor screen appears, select the Add action.

```

Menu Editor                               Jul 15, 1997 16:11:17          Page:      1 of      1
Menu: FHWMENUZ                               Column Width: 40
  1                                           2
| 1      Diet Order
| 2      NPO                                N1      NPO Now
| 3      Early/Late Tray                    N2      NPO at Midnight
| 4      Tubefeeding
+5      Additional Orders
|
| 7      Isolation/Precautions
|
1
|
|
+

+ Next Screen  - Prev Screen  ?? More Actions                                >>>
Add ...          Edit ...          Assign to User(s)    Select New Menu
Remove ...       Toggle Display    Order Dialogs ...   Quit
Select Action: Quit// A      ADD

```

[illegible]

*Enter/edit order menus, cont'd*

3. Answer the following prompts about the new orderable.

```
ITEM: FHW9Z
ROW: 4
COLUMN: 2
DISPLAY TEXT: Junk Food
MNEMONIC: JF

ITEM: <Enter>

Rebuilding menu display ...
```

Menu Editor		Jul 15, 1997 16:20:20		Page: 1 of 1	
Menu: FHWMENU				Column Width: 40	
1		2			
1	Diet Order				
2	NPO	N1	NPO Now		
3	Early/Late Tray	N2	NPO at Midnight		
4	Tubefeeding	JF	Junk Food		
+5	Additional Orders				
7	Isolation/Precautions				
+ Next Screen - Prev Screen ?? More Actions >>>					
Add ...		Edit ...		Assign to User(s)	
Remove ...		Toggle Display		Order Dialogs ...	
Select Action: Quit//		ASSIGN TO USER(S)		Select New Menu	
				Quit	

## Assign Primary Order Menu

This option is used to assign a primary order menu to users. A primary order menu must be assigned to each user who will add orders in CPRS. This menu appears in the List Manager interface after assignment.

Examples of menus assigned to users:

OR ADD MENU CLINICIAN  
OR ADD MENU NURSE  
OR ADD MENU WARD CLERK  
ORZ ADD MENU DR BROWN

```
OI      Enter/edit orderable items
PM      Enter/edit prompts
GO      Enter/edit generic orders
QO      Enter/edit quick orders
ST      Enter/edit order sets
AC      Enter/edit actions
MN      Enter/edit order menus
AO      Assign Primary Order Menu
CP      Convert protocols
SR      Search/replace components
LM      List Primary Order Menu

You have PENDING ALERTS
      Enter "VA VIEW ALERTS      to review alerts

Select Order Menu Management Option: A Assign Primary Order Menu

Select NEW PERSON NAME: GREEN,JOANN      jg

Add Orders Menu Default for User: GREEN,JOANN
-----
Add New Orders                                ORZ ADD MENU CLINICIAN
-----
Add Order Menu Default: ORZ ADD MENU CLINICIAN// <Enter> ORZ ADD MENU
CLINICIAN


OI      Enter/edit orderable items
PM      Enter/edit prompts
GO      Enter/edit generic orders
QO      Enter/edit quick orders
ST      Enter/edit order sets
AC      Enter/edit actions
MN      Enter/edit order menus
AO      Assign Primary Order Menu
CP      Convert protocols
SR      Search/replace components
LM      List Primary Order Menu

You have PENDING ALERTS
      Enter "VA VIEW ALERTS      to review alerts

Select Order Menu Management Option: <Enter>
```

## Convert Protocols

This option lets you convert individual protocols used in OE/RR 2.5 to CPRS orderable items.

 **NOTE:** Most protocols currently on OE/RR 2.5 menus at a site are automatically converted to CPRS menus. However, many quick orders created by sites have entry and exit actions containing M code, which the conversion utility can't convert. Before converting these, you need to use the *Enter/Edit Orderable Items* to delete the entry and exit actions.

1. Select Convert Protocols from the Order Menu Management menu on the CPRS Implementation menu.

```
Select CPRS Configuration Menu Option: MM Order Menu Management
OI      Enter/edit orderable items
PM      Enter/edit prompts
GO      Enter/edit generic orders
QO      Enter/edit quick orders
ST      Enter/edit order sets
AC      Enter/edit actions
MN      Enter/edit order menus
AO      Assign primary order menu
CP      Convert protocols
SR      Search/replace components
LM      List Primary Order Menu

Select Order Menu Management Option: CP Convert protocols
```

2. Enter the protocol name that you want to convert.

```
Select PROTOCOL NAME: ?
Answer with PROTOCOL NAME, or ITEM TEXT, or SYNONYM, or ACCESS, or
SET MEMBERSHIP
Do you want the entire 3405-Entry PROTOCOL List? N (NO)
Select PROTOCOL NAME:LRTZ CHOLESTEROL SERUM MARBLED
Add this item to the same menus again? YES// <Enter>
Converting ...done
```

## Search/Replace Components

This option lets you search for a specific component (orderable item, order dialog, order set, protocol, etc.). You can then replace any or all instances of the component with a new component or delete the component. The option displays the ancestors of the component to let you choose which instances to change.

### Example

```
OI      Enter/edit orderable items
PM      Enter/edit prompts
GO      Enter/edit generic orders
QO      Enter/edit quick orders
ST      Enter/edit order sets
AC      Enter/edit actions
MN      Enter/edit order menus
AO      Assign Primary Order Menu
CP      Convert protocols
SR      Search/replace components
LM      List Primary Order Menu

Select Order Menu Management Option: SR Search/replace components
Search for: LRTZ
    1  LRTZ CBC
    2  LRTZ CBC W/DIFF
    3  LRTZ GLUCOSE SERUM
    4  LRTZ UA
CHOOSE 1-4: 1

Ancestors of LRTZ CBC
      Name                                                    Type
-----
1  ORZ ADD MENU CLINICIAN                                     menu
2  LRZ TEST SET                                              order set
-----

Replace LRTZ CBC with: ?

Enter the name of the item you to replace this one with, or @ to remove
this item; to quit without changing anything, press <return>.

Replace LRTZ CBC with: LRTZ CBC W/DIFF
Replace in: 1-2// 1

Are you ready? NO// YES

Replacing LRTZ CBC with LRTZ CBC W/DIFF in:
    ORZ ADD MENU CLINICIAN ...done.

Search for: <Enter>

OI      Enter/edit orderable items
PM      Enter/edit prompts
GO      Enter/edit generic orders
QO      Enter/edit quick orders
ST      Enter/edit order sets
AC      Enter/edit actions
MN      Enter/edit order menus
AO      Assign Primary Order Menu
CP      Convert protocols
SR      Search/replace components
LM      List Primary Order Menu
Select Order Menu Management Option: <Enter>
```

This prompt lets you select which of the ancestors of this component to change. If you take the default (which will always include all of the ancestors), you will replace or delete all instances of this component.

## List Primary Order Menus

This option lets you print a list of all the users who have a particular add order menu assigned to them. You will also get a list of the locations, divisions etc. that have those menus. You can also request a complete list of all add order menus and all users.

### Example

```
OI      Enter/edit orderable items
PM      Enter/edit prompts
GO      Enter/edit generic orders
QO      Enter/edit quick orders
ST      Enter/edit order sets
AC      Enter/edit actions
MN      Enter/edit order menus
AO      Assign Primary Order Menu
CP      Convert protocols
SR      Search/replace components
LM      List Primary Order Menus

Select Order Menu Management Option: LM List Primary Order Menus

START WITH Add order menu: FIRST// OR ADD MENU CLINICIAN
DEVICE:  ANYWHERE      RIGHT MARGIN: 80//

CPRS Add order menu list          NOV  2,1998  09:09      PAGE 1
Menu                               User/Location/etc.
-----
OR ADD MENU CLINICIAN             ORDER ENTRY/RESULTS REPORTING
                                   ORNETTE COLEMAN
                                   MILES DAVIS
                                   HERBIE HANCOCK
                                   SHIRLEY HORN
                                   DIANA KRALL
                                   TOM WAITS
```

## 9. Patient and Team Lists

If your site has patient and team lists set up through OE/RR 2.5, these will be automatically converted during the installation process. Review these after the installation, and modify, if necessary.

### Creating Patient or Team Lists

Clinicians can create patient lists by ward, clinic, or by patient to use for displaying results or creating reports. They can build lists, delete lists, merge lists, add or delete patients from lists, or inquire to a file of patient lists.

Clinical Coordinators can help to set up team lists for groups of clinicians and related hospital personnel. Clinicians can create patient lists by ward, clinic, or by patient to use for displaying results or creating reports. They can build lists, delete lists, merge lists, add or delete patients from lists, or inquire to a file of patient lists.

If a user has a list defined and loaded (as determined in the Personal Preferences options), the list will be available every time the user selects the CPRS Clinician, Nurse, or Ward Clerk Menu. The user will then select a patient from the list. This list can also be used for printing reports.

The team lists also help determine who receives notifications for patients defined on the lists.

### Patient List Mgmt Menu

Option Text	Option Name	Description
Team List Mgmt Menu	ORLP TEAM MENU	Options on this menu allow you to create team patient lists. You can create or add autolinks to a team list, review existing team lists, remove patients or users from team lists, delete autolinks from an existing team list or delete an entire team list.
Patient Selection Preference Mgmt	ORLP3M DEFAULT MGR MENU	This menu allows IRM to set ORLP default patient list parameters for all entities that are allowed except PACKAGE.
Display User's Teams	ORLP3M USER TEAMS	Displays teams from the OE/RR LIST file [#100.21] linked to a user.
Display Patients Linked to a User via Teams	ORLP3M USER PTS VIA TEAMS	Displays patients linked to a user via teams from the OE/RR LIST file [#100.21].

## Team List Mgmt Menu

Option Text	Option Name	Description
Create/Add to Team List	ORLP TEAM ADD	This option allows team list creation or the addition of autolinks, providers, and/or patients to existing lists.
Examine/Print Existing List(s)	ORLP EXAMINE/PRINT	This option allows you to examine or print an existing patient list.
Remove Providers from a List	ORLP TEAM DELETE USERS	Use this option remove users/providers from a team list.
Remove Patients from a List	DELETE PATIENTS	Use this option to remove patients from a team list.
Delete Existing List(s)	ORLP TEAM DELETE	When you no longer need a team list that you have built, you can use this option to delete the list.
Remove Autolinks	ORLP TEAM DELETE AUTOLINKS	This option is used to remove existing Autolinks from a team list and the patients associated with the removed autolinks.

## Create/Add to Team List Example

```
Select Team List Mgmt Menu Option: CR Create/Add to Team List

A team list is a list containing patients related to several providers.
These providers are the list's users. You may now create a new team list
or add autolinks, users and/or patients to an existing team list. Autolinks
automatically add or remove patients with ADT movements. Users on the list
may receive notifications regarding patients on the same list. Please prefix
your list name with 'TEAM' or 'SERVICE' (e.g. TEAM7B, SERVICECARDIOLOGY.)

Enter team list name: teamqa
Are you adding 'teamqa' as a new OE/RR LIST? No// Y (Yes)
TYPE: ??
This is the type of list being defined. List type currently includes
team and personal.
o Team lists
o TM - Manually maintained (addition and removal)
o TA - Maintained by Autolinks for addition and removal of
patients.
o MRAL - Manual removal of patients from the list with Autolink
addition of patients to the list.

o Personal lists
o P - Manually maintained (addition and removal)

Choose from:
P PERSONAL PATIENT
TA TEAM PATIENT AUTOLINKED
TM TEAM PATIENT MANUAL
MRAL MANUAL REMOVAL/AUTOLINK ADDITION
```



### *Create/Add to Team List, cont'd*

TYPE: **TM** TEAM PATIENT MANUAL

Select one of the following:

N	NAME
W	WARD
C	CLINIC
P	PROVIDER
T	TREATING SPECIALTY

to enter additional patients. (? for help): ?

You may add patients to this list individually by patient NAME, or as a group such as an entire WARD, patients in a CLINIC, all patients seeing a PROVIDER, or patients in a TREATING SPECIALTY.

**\*\* CAUTION \*\***

The patients added here will create a static list that will not change through MAS movements.

Select one of the following:

N	NAME
W	WARD
C	CLINIC
P	PROVIDER
T	TREATING SPECIALTY

to enter additional patients. (? for help): **CLINIC**

Select CLINIC: **CARDIOLOGY**

Patient Appointment STARTING DATE: T//**T-60** (AUG 28, 1997)

Patient Appointment ENDING DATE: AUG 28, 1997//**T+60** (DEC 26, 1997)

Working...

Select CLINIC:

12 patient(s) added.

Storing list for future reference...

Select one of the following:

N	NAME
W	WARD
C	CLINIC
P	PROVIDER
T	TREATING SPECIALTY

to enter additional patients. (? for help): **<Enter>**

Enter Team Provider/User: **<Enter>**

Enter Device: **<Enter>**

## Patient Selection Preference Management Menu

This menu on the Clinical Coordinator Menu or on a clinician's Personal Preferences Menu contains options that let coordinators or users set default parameters for patient lists.

Option	Description
Display User's Patient List Source	Display a user's default patient list source.
Set Preferred Clinic Start Date	Patients with appointment dates as early as this date will be added to the Clinic List. Patients will be added with appointment dates between START DATE and STOP DATE.
Set Preferred Clinic Stop Date	Patients with appointment dates as recent as this date will be added to the Clinic List. Patients will be added with appointment dates between START DATE and STOP DATE.
Set Preferred Clinic Sunday	Clinic to be default source of Sunday's patient list.
Set Preferred Clinic Monday	Clinic to be default source of Monday's patient list.
Set Preferred Clinic Tuesday	Clinic to be default of Tuesday's patient list.
Set Preferred Clinic Wednesday	Clinic to be default source of Wednesday's patient list.
Set Preferred Clinic Thursday	Clinic to be default source of Thursday's patient list.
Set Preferred Clinic Friday	Clinic to be source of Friday's patient list.
Set Preferred Clinic Saturday	Clinic to be default source of Saturday's patient list.
Set Preferred Sort Order for Patient List	Default sort order for the patient list. Room/Bed is valid only for inpatients list (Ward, Team/Personal, Provider, Specialty). Appointment Date is valid only for outpatient lists (Clinic)
Set Preferred List Source	Default preference for patient list source.
Set Preferred Primary Provider	Provider who is basis for building the Provider List of patients.
Set Preferred Treating Specialty	Treating Specialty used as a source for patients on the Specialty List.
Set Preferred Team List	Team/Personal list to be default source of patients.
Set Preferred Ward	Ward for default list of patients.

### Display your Patient List Source example

```
Select Patient Selection Preference Menu Option: 1  Display Your Patient List
Source

Your default list of patients is based on: Ward  2B
<RETURN> to continue: <Enter>

Select Patient Selection Preference Menu Option: 13  Set Default Provider

                               Set Default Provider
-----
----- Setting  for User: GREEN,JOANN -----
Value: GREEN,JOANN//  Welby, Doctor
```

## 10. Print Formats

The CPRS *Print Formats* option allows a lot of flexibility in customizing reports for CPRS. Each site must select the print formats it will use for printing labels, requisitions, order copies, and chart copies. The hospital's Medical Records Committee needs to approve the print formats chosen for its site. Be sure to determine how many printers you'll need for each ward, and where they'll be located.

We distribute pre-defined print formats that point to pre-defined print fields. You may copy these to a number space between 1 and 999 and modify these for your use. If the pre-defined print fields don't satisfy your print requirements, then create a new field in the CPRS PRINT FIELDS file in the number space between 1 and 999. If you are transferring an entry in the PRINT FIELDS file (#100.22) to the 1-999 range for local use, answer "NO" to the prompt "Do you want the pointers updated?"; otherwise, existing print formats that depend on old definitions will be altered.

### Definitions

Print type	Definition
Service copy	Copies of orders and actions for a particular service that can be printed upon request for the use of that service. The service copy can also be set up for automatic printing at a defined location (usually in the service). Contains header, body, and footer.
Chart Copy	A copy of all current orders that appear on a patient's chart, using a pre-defined format. Each hospital can only have one format for Chart Copies. Chart copies can also be automatically printed on the ward. <b>This is the official copy for the medical record.</b>
Work Copy	A working copy of order(s) that will be kept
Requisition	A working copy of order(s) that will be sent with the order to the service.
Label	A copy of the order that is printed on a label to be stuck on the container of the order (e.g., a medication or a lab sample).

## Defining a New Print Format

```
Select Clinical Coordinators Menu Option: FP Print Formats
Select CPRS PRINT FORMATS NAME: ?
Answer with CPRS PRINT FORMATS NUMBER, or NAME
Do you want the entire 26-Entry OE/RR PRINT FORMATS List? Y (Yes)
Choose from:
1          LAB LABEL/INTERMEC
2          LOCAL RX LABEL
1002       LAB ORDER LABEL
1003       LAB REQUISITION
1004       CHART COPY 1
1005       CHART COPY 2
1006       CHART COPY HEADER
1007       CHART COPY FOOTER
1008       SHORT
1009       LONG
1010       DOCTOR'S ORDERS
1011       CONSULTATION FOOTER
1012       CONSULTATION HEADER
1013       CONSULTATION BODY
1015       CHART COPY BODY
1016       DOCTORS ORDERS FOOTER
1017       DOCTOR'S ORDERS HEADER
1018       LAB SERVICE COPY HEADER
1019       RX HEADER
1020       LAB LABEL (Buffalo)
1021       RX FOOTER
1022       GENERIC ORDER LABEL
1023       WORK COPY FORMAT
1024       WORK COPY HEADER
1025       WORK COPY FOOTER
1026       RX LABEL FORMAT

Select OE/RR PRINT FORMATS NAME: DOCTORS ORDERS
NAME: DOCTORS ORDERS// <Enter>
Select FIELDS: AGE of Patient// ?
Answer with FIELDS
Choose from:
NAME of Patient      Row:  1      Col:  41      Caption: NONE
SSN of Patient       Row:  2      Col:  41      Caption: NONE
AGE of Patient       Row:  2      Col:  66      Caption: NONE
DOB of Patient       Row:  2      Col:  55      Caption: NONE
REQUESTING PHYSICIAN Row:  4      Col:  1       Caption:
ROOM/BED of Patient  Row:  3      Col:  58      Caption: NONE
LOCATION of Patient    Row:  4      Col:  58      Caption: NONE
ORDER TEXT          Row:  2      Col:  1       Caption: NONE
START DATE          Row:  1      Col:  1       Caption: Start Date:

    You may enter a new FIELDS, if you wish
    Enter the field to be added to this format.
    Answer with OE/RR PRINT FIELDS NUMBER, or NAME
Do you want the entire 59-Entry OE/RR PRINT FIELDS List? Y (Yes)
Choose from:
1          LAB INTERMEC ORDER LABEL
2          RX INTERMEC MAR LABEL
1001       NAME of Patient
1002       SSN of Patient
1003       SEX of Patient
1004       AGE of Patient
1005       DOB of Patient
1006       REQUESTING LOCATION
1007       REQUESTING PHYSICIAN
1008       ROOM/BED of Patient
```

### *Defining a new Print Format (cont'd)*

1009	LOCATION of Patient
1010	ORDER TEXT
1011	START DATE
1012	STOP DATE
1013	ORDER DATE
1014	FREE TEXT
1015	ATTENDING PHYSICIAN
1016	COLLECTION TYPE (LAB)
1017	LAB ORDER #
1018	LAB TEST
1019	LAB URGENCY
1020	TIME COLLECTED
1021	ENTERED BY
1022	STATUS OF ORDER
1026	ELECTRONIC SIGNATURE NAME
1028	ENTERED BY (Initials)
1029	HORIZONTAL LINE
1032	NATURE OF ORDER
1033	CURRENT DATE
1034	REASON FOR REQUEST
1035	PROVISIONAL DIAGNOSIS
1036	CONSULTANT
1037	PLACE OF CONSULTATION
1038	CONSULT URGENCY
1039	REQUEST TYPE
1040	LAB ACCESSION
1041	PROCEDURE/CONSULT TYPE
1042	ELECTRONIC SIGNATURE TITLE
1043	LAB COLLECTION w/CONTAINER
1044	CURRENT DATE/TIME
1045	DC by & when
1046	WARD COMMENTS ON LAB SPECIMEN
1047	RX ADMINISTRATION TIMES
1048	RX SPECIAL INSTRUCTIONS
1050	PRIMARY CARE PHYSICIAN
1070	DC REASON
1071	DC PERSON
1072	DC DATE
1074	WHEN PRINTED
1075	EFFECTIVE DATE
1076	RX LABEL-INPATIENT
1077	LAB TEST.SPECIMEN COMMENTS
1078	LAB TEST COMMENTS
1079	CONSULT RESULTS
1080	RX ROUTING
1081	DIGITAL PAGER CLINICIAN
1082	ANALOG PAGER CLINICIAN
1083	RX URGENCY
1084	ENTERED BY SIGNATURE TITLE

Select FIELDS: **START DATE**

...OK? Yes// (Yes)

Row: 1 Col: 1 Caption: Start Date:

FIELDS: START DATE// <Enter>

ROW: 1//<Enter>

COLUMN: 1//<Enter>

CAPTION (Optional): Start Date: //<Enter>

SUPPRESS CAPTION: ?

Answer YES to suppress printing of caption when no data for field.

Choose from:

0	NO
1	YES

SUPPRESS CAPTION: 1

### *Defining a new Print Format (cont'd)*

```
YES  FORMAT: ?

Enter the format specifier of the selected field.
Allowable values include:
MM   - Numeric months
DD   - Numeric Days
YY   - Numeric Years
CC   - Numeric Century
HR   - Numeric Hour of Day
MIN  - Numeric Minute
SEC  - Numeric Second
AMTH - Alphabetic Month
All other characters will be treated as delimiters.
Examples: MM/DD/YY HR:MIN ==> 04/29/91 11:15, or
          DD AMTH CCYY ==> 29 APR 1991
FORMAT: MM/DD HR:MIN
Select FIELDS: ORDER TEXT
...OK? Yes// <Enter> (Yes)
          Row: 2      Col: 1      Caption: NONE
FIELDS: ORDER TEXT// <Enter>
ROW: 2//<Enter>
COLUMN: 1//<Enter>
CAPTION (Optional): NONE//<Enter>
SUPPRESS CAPTION: Y YES
FORMAT: 38//<Enter>
Select FIELDS: NAME of Patient
...OK? Yes// (Yes)
          Row: 4      Col: 1      Caption:
FIELDS: NAME of Patient// <Enter>
ROW: 4//<Enter>
COLUMN: 1//<Enter>
CAPTION (Optional): <Enter>
SUPPRESS CAPTION: Y YES  FORMAT: ?
Enter the format specifier of the selected field.
Allowable values include:
LAST - Last Name
FIRST - First Name
MI    - Middle Initial
FI    - First Initial
LI    - Last Initial
All other characters will be treated as delimiters.
Examples: LAST,FIRST MI ==> DOE, JOHN M or
          FI MI LAST ==> J M DOE
FORMAT: LAST,FI
Select FIELDS:<Enter>
```

### Defining a new Print Format (cont'd)

```
... 'GENERIC ORDER LABEL' format has been compiled.

|||||----- Column Numbers -----|||||
0---+---1---+---2---+---3---+---4---+---5---+---6---+---7---+---8
1      0      0      0      0      0      0      0      0

Start Date: 03/04/97          SMITH,JOHN
LDH BLOOD SERUM LB #123 WC ROUTINE 123-45-6789      ??
PHY: WELBY,MARCUS              A3/1
                                2A

Select OE/RR PRINT FORMATS NAME: <Enter>
```

The format above is the result of the selections you have made for fields, row #s and column #s. It can be the format used for requisitions, labels, service order copies, work copies, and chart copy printouts you (or a clinician) request through the “Order Entry/ Review/Profiles” option.

### Example of the Chart Copy as defined in the options above

```
MEDICAL RECORD | DOCTOR'S ORDERS
-----
NOTE:Physician's signature must accompany each entry including standing orders
Date and time for instituting and discontinuing the orders must be recorded
-----
DATE & TIME | ORDERS | SIGNATURES
-----
04/07 15:04   Diet Order: REGULAR          /es/ MAL,D, Chief of Staff
03/22 10:24   CT THORAX W&W/O CONT LEFT /es/ MAROSE,C, Att. Phys.

-----
ANDRUS, R      234-23-8382
Loc:           Date: 02/06/92

MEDICAL RECORD
DOCTOR'S ORDERS
VA FORM 10-1158
_____
```

👉 NOTE: The title is taken from the name entered in the SIGNATURE BLOCK field in the *Edit Electronic Signature Code* on the Personal Preferences menu.

## Exported Print Formats

LAB ORDER LABEL  
LAB REQUISITION  
CHART COPY 1  
CHART COPY 2  
CHART COPY HEADER  
CHART COPY FOOTER  
SHORT  
LONG  
DOCTOR'S ORDERS  
CONSULTATION FOOTER  
CONSULTATION HEADER  
CONSULTATION BODY  
CHART COPY BODY  
DOCTORS ORDERS FOOTER  
DOCTOR'S ORDERS HEADER  
LAB SERVICE COPY HEADER  
RX HEADER  
LAB LABEL (Buffalo)  
RX FOOTER  
GENERIC ORDER LABEL  
WORK COPY FORMAT  
WORK COPY HEADER  
WORK COPY FOOTER  
RX LABEL FORMAT



## Print Formats —Review and Print orders

After you have defined the print formats for your hospital, wards, and clinics, the print options can be used to review or print copies from CPRS screens — either in the GUI or List Manager Interfaces.

An example of the sequence of actions to get to the print options for the List Manager interface is shown below:

1. After selecting a patient, select the Chart Contents (CC) action.

### SHORTCUT

You can enter CC for Chart Contents followed by a semi-colon, followed by an action from the Chart Contents screen: CC;O, to skip a screen.

Cover Sheet		Jun 26, 1997 08:34:01		Page: 1 of 3	
ANDERSON,H C 321-12-3456		2B		JAN 1,1951 (46) <CWA>	
Item	Entered				
1	Allergies/Adverse Reactions				
2	PENICILLIN 1 (rash, nausea,vomiting)				
7	BEESWAX (hives, itching,watering eyes, anxiety)				
	Patient Postings				
	CRISIS NOTE				
06/18/97 08:28					
+ Enter the numbers of the items you wish to act on. >>>					
NW	Add New Orders	CG	Change List ...	SP	Select New Patient
+	Next Screen	CC	Chart Contents ...	Q	Close Patient Chart
Select: Next Screen//CC;O Chart Contents ...					
Searching for the patient's chart ...					

2. When the Orders screen appears, enter the number of an order to review.

Active Orders		Jun 26, 1997 08:34:31		Page: 1 of 17	
ANDERSON,H C 321-12-3456		2B		JAN 1,1951 (46) <CWA>	
Selected date range: Not Applicable (active orders being viewed)					
Item Ordered	Requestor	Start	Stop	Sts	
1 Electrocadiogram Bedside	ARCENEAU,C			pend	
2 GLUCOSE SERUM WC QD	KLARK,D	06/18	06/21	actv	
3 GENTAMICIN CREAM,TOP ONCE TOP ONCE	KLARK,D			pend	
4 TRIAMCINOLONE 0.1% CREAM 454GM Apply 1	INSLEY,M			pend	
DAB TOP Q2H for 10 DAYS days Quantity: 1					
5 ENALAPRIL 10MG Quantity: 1 5 refills	INSLEY,M	06/15	06/16	pend	
TAKE ONE PILL QD					
6 PARTIAL THROMBOPLASTIN TIME PLASMA WC	INSLEY,M	05/21/97		pend	
LB #1304		16:14			
7 Reaction to NOIS CALLS Feb 10, 1997	INSLEY,M	02/10/97		actv	
8 GLUCOSE SERUM WC LB #1295	DEFA,T	05/21/97		pend	
		10:48			
+ Enter the numbers of the items you wish to act on. >>>					
NW	Add New Orders	CG	Change List ...	SP	Select New Patient
+	Next Screen	CC	Chart Contents ...	Q	Close Patient Chart
Select: Next Screen// 4					

### Review and Print orders, cont'd

3. The order you selected is highlighted.

A new set of actions, which you can perform on this order, appears.

Active Orders		Jun 26, 1997 08:40:13		Page: 1 of 17	
ANDERSON,H C 321-12-3456 2B		JAN 1,1951 (46)		<CWA>	
Selected date range: Not Applicable (active orders being viewed)					
Item Ordered	Requestor	Start	Stop	Sts	
1 Electrocardiogram Bedside	ARCENEAU,C			pend	
2 GLUCOSE SERUM WC QD	KLARK,D	06/18	06/21	actv	
3 DAB TOP Q2H for 10 DAYS days Quantity: 1 GENTAMICIN CREAM,TOP ONCE TOP ONCE	KLARK,D			pend	
4 TRIAMCINOLONE 0.1% CREAM 454GM Apply 1 refills PROVIDER INSTRUCTIONS GO HERE	INSLEY,M			pend	
5 ENALAPRIL 10MG Quantity: 1 5 refills TAKE ONE PILL QD	INSLEY,M	06/15	06/16	pend	
6 PARTIAL THROMBOPLASTIN TIME PLASMA WC LB #1304	INSLEY,M	05/21/97 16:14		pend	
7 Reaction to NOIS CALLS Feb 10, 1997	INSLEY,M	02/10/97		actv	
8 GLUCOSE SERUM WC LB #1295	DEFA,T	05/21/97 10:48		pend	
+ Enter ?? for more actions >>>					
Change	Sign	Flag	Details	Print ...	
Renew	Hold	Unflag	Results		
Discontinue	Release Hold	Ward Comments	Alert Results		
Select Action: P Print					

4. If you select Print, the available Print types are presented

Active Orders		Jun 26, 1997 08:40:13		Page: 1 of 17	
ANDERSON,H C 321-12-3456 2B		JAN 1,1951 (46)		<CWA>	
Selected date range: Not Applicable (active orders being viewed)					
Item Ordered	Requestor	Start	Stop	Sts	
1 Electrocardiogram Bedside	ARCENEAU,C			pend	
2 GLUCOSE SERUM WC QD	KLARK,D	06/18	06/21	actv	
3 DAB TOP Q2H for 10 DAYS days Quantity: 1 GENTAMICIN CREAM,TOP ONCE TOP ONCE	KLARK,D			pend	
4 TRIAMCINOLONE 0.1% CREAM 454GM Apply 1 refills PROVIDER INSTRUCTIONS GO HERE	INSLEY,M			pend	
5 ENALAPRIL 10MG Quantity: 1 5 refills TAKE ONE PILL QD	INSLEY,M	06/15	06/16	pend	
6 PARTIAL THROMBOPLASTIN TIME PLASMA WC LB #1304	INSLEY,M	05/21/97 16:14		pend	
7 Reaction to NOIS CALLS Feb 10, 1997	INSLEY,M	02/10/97		actv	
8 GLUCOSE SERUM WC LB #1295	DEFA,T	05/21/97 10:48		pend	
+ Enter ?? for more actions >>>					
Labels	Work Copies	Service Copies			
Requisitions	Labels				
Select type of print:					

## 11. Print/Report Parameters

The Print/Report Parameters menu contains options for editing the parameters of various types of reports printed at hospitals. It should be available to the clinical coordinator and IRM Staff.

Option Name	Menu Text	Description
OR PARAM CHART COPY	Chart Copy Parameters	This option is for editing hospital wide Chart Copy parameters.
OR PARAM WORK COPY	Work Copy Parameters	This option is for editing Work Copy site parameters.
OR PARAM SERVICE COPY	Service Copy Parameters	This option is for editing Service Copy site parameters.
OR PARAM REQ/LABEL	Requisition/Label Parameters	This option is for editing requisition and label site parameters.
OR PARAM SUMMARY REPORTS	Summary Report Parameters	This option is for editing Summary Report site parameters.
OR PARAM PRINTS (HOSP)	Print Parameters for Hospital	This option is for editing hospital wide print parameters for CPRS.
OR PARAM PRINTS (LOC)	Print Parameters for Wards/Clinics	This option is for editing print parameters for each ward/clinic location.

## Chart Copy Parameters

Chart Copies are the official copy for the record of all current orders that appear on a patient's chart, using a pre-defined format. Each hospital can only have one format for Chart Copies. Chart copies can also be automatically printed on the ward.

```
Select CPRS Configuration Menu (Clin Coord) Option: PE Print/Report
Parameters
```

```
CC      Chart Copy Parameters
WC      Work Copy Parameters
SC      Service Copy Parameters
RE      Requisition/Label Parameters
UM      Summary Report Parameters
HO      Print Parameters for Hospital
LO      Print Parameters for Wards/Clinics
```

```
You have PENDING ALERTS
```

```
Enter "VA VIEW ALERTS to review alerts
```

```
Select Print/Report Parameters Option: CC Chart Copy Parameters
```

```
Chart Copy Definition for System: OEX.ISC-SLC.VA.GOV
```

```
-----
Chart Copy Format                DOCTOR'S ORDERS
Chart Copy Header               CHART COPY HEADER
Chart Copy Footer               CHART COPY FOOTER
Expand Continuous Orders        NO
Print Chart Copy When            signing orders
-----
```

```
CHART COPY FORMAT: DOCTOR'S ORDERS// ??
```

```
Choose from:
```

```
1          LAB LABEL/INTERMEC
1002       LAB ORDER LABEL
1003       LAB REQUISITION
1004       CHART COPY 1
1005       CHART COPY 2
1006       CHART COPY HEADER
1007       CHART COPY FOOTER
1008       SHORT
1009       LONG
1010       DOCTOR'S ORDERS
1011       CONSULTATION FOOTER
1012       CONSULTATION HEADER
1013       CONSULTATION BODY
1015       CHART COPY BODY
1016       DOCTORS ORDERS FOOTER
1017       DOCTOR'S ORDERS HEADER
1018       LAB SERVICE COPY HEADER
1019       RX HEADER
1020       LAB LABEL (Buffalo)
1021       RX FOOTER
1022       GENERIC ORDER LABEL
1023       WORK COPY FORMAT
1024       WORK COPY HEADER
```

### Chart Copy Parameters, cont'd

```
1025          WORK COPY FOOTER
1026          RX LABEL FORMAT
CHART COPY FORMAT: DOCTOR'S ORDERS// <Enter> DOCTOR'S ORDERS
CHART COPY HEADER: CHART COPY HEADER// <Enter> CHART COPY HEADER
CHART COPY FOOTER: CHART COPY FOOTER// <Enter> CHART COPY FOOTER
EXPAND CONTINUOUS ORDERS: NO// ??

This is a site parameter to enable continuous orders (i.e., orders with a
continuous schedule, e.g., QD or Q4H) to be expanded or not on the chart
copy. If set to YES, an order for GLUCOSE BLOOD SERUM with the schedule
QD would appear on the chart as:

05/17 11:04  GLUCOSE BLOOD SERUM          Marcus Welby, MD
              LB #805      WC      ROUTINE

05/18 11:04  GLUCOSE BLOOD SERUM          Marcus Welby, MD
              LB #806      WC      ROUTINE

05/19 11:04  GLUCOSE BLOOD SERUM          Marcus Welby, MD
              LB #807      WC      ROUTINE

If this parameter is set to NO, the same order would appear as:

05/17 11:04  GLUCOSE BLOOD SERUM    QD          Marcus Welby, MD

EXPAND CONTINUOUS ORDERS: NO// <Enter>
PRINT CHART COPY WHEN: signing orders// ?
'R' prints chart copy when orders are released; 'S' prints when orders
signed.
Select one of the following:
      R      releasing order
      S      signing orders

PRINT CHART COPY WHEN: signing orders// ??

Chart copies may be printed when orders are
a) released to the service
b) signed by a clinician (may be after the orders are released)

This parameter determines at which point the chart copy of orders will
print. The chart copy may be printed when the order is released to the
service or delayed until the order is actually signed.

PRINT CHART COPY WHEN: signing orders// R  releasing order

CC      Chart Copy Parameters
WC      Work Copy Parameters
SC      Service Copy Parameters
RE      Requisition/Label Parameters
UM      Summary Report Parameters
HO      Print Parameters for Hospital
LO      Print Parameters for Wards/Clinics

You have PENDING ALERTS
      Enter  "VA  VIEW ALERTS      to review alerts

Select Print/Report Parameters Option: <Enter>
```

## Work Copy Parameters

Select CPRS Configuration Menu (Clin Coord) Option: **PE** Print/Report Parameters

CC Chart Copy Parameters  
WC Work Copy Parameters  
SC Service Copy Parameters  
RE Requisition/Label Parameters  
UM Summary Report Parameters  
HO Print Parameters for Hospital  
LO Print Parameters for Wards/Clinics

Select Print/Report Parameters Option: **W** Work Copy Parameters

Work Copy Definition for System: OEX.ISC-SLC.VA.GOV

-----  
Work Copy Format WORK COPY FORMAT  
Work Copy Header WORK COPY HEADER  
Work Copy Footer WORK COPY FOOTER  
-----

WORK COPY FORMAT: WORK COPY FORMAT// **<Enter>** WORK COPY FORMAT  
WORK COPY HEADER: WORK COPY HEADER// **<Enter>** WORK COPY HEADER  
WORK COPY FOOTER: WORK COPY FOOTER// **<Enter>** WORK COPY FOOTER

CC Chart Copy Parameters  
WC Work Copy Parameters  
SC Service Copy Parameters  
RE Requisition/Label Parameters  
UM Summary Report Parameters  
HO Print Parameters for Hospital  
LO Print Parameters for Wards/Clinics

Select Print/Report Parameters Option: **<Enter>**

## Service Copy Parameters

This option is for editing Service Copy site parameters.

```
Select CPRS Configuration Menu (Clin Coord) Option: PE Print/Report
Parameters

  CC      Chart Copy Parameters
  WC      Work Copy Parameters
  SC      Service Copy Parameters
  RE      Requisition/Label Parameters
  UM      Summary Report Parameters
  HO      Print Parameters for Hospital
  LO      Print Parameters for Wards/Clinics

You have PENDING ALERTS
      Enter "VA VIEW ALERTS      to review alerts

Select Print/Report Parameters Option: SC Service Copy Parameters
Service Copy Parameters
Select PACKAGE: LAB SERVICE      LR

Service Copy Definition for System: OEX.ISC-SLC.VA.GOV, LAB SERVICE
-----
Service Copy Format      LAB SERVICE      DOCTOR'S ORDERS
Service Copy Header     LAB SERVICE      LAB SERVICE COPY HEADER
Service Copy Footer     LAB SERVICE      CHART COPY FOOTER
Service Copy Default Device LAB SERVICE      LASER
-----
  FORMAT: DOCTOR'S ORDERS// ?
Answer with OE/RR PRINT FORMATS NUMBER, or NAME
Do you want the entire 25-Entry OE/RR PRINT FORMATS List? N (No)
  FORMAT: DOCTOR'S ORDERS// <Enter> DOCTOR'S ORDERS
  HEADER: LAB SERVICE COPY HEADER// <Enter> LAB SERVICE COPY HEADER
  FOOTER: CHART COPY FOOTER// <Enter> CHART COPY FOOTER
  DEVICE: LASER// <Enter> LASER PRINTER ROOM LN11 12 PITCH _LTA36:

Service Copy Definition for System: OEX.ISC-SLC.VA.GOV, LAB SERVICE is now:
-----
Service Copy Format      LAB SERVICE      DOCTOR'S ORDERS
Service Copy Header     LAB SERVICE      LAB SERVICE COPY HEADER
Service Copy Footer     LAB SERVICE      CHART COPY FOOTER
Service Copy Default Device LAB SERVICE      LASER
-----
Enter RETURN to continue or '^' to exit: <Enter>

  CC      Chart Copy Parameters
  WC      Work Copy Parameters
  SC      Service Copy Parameters
  RE      Requisition/Label Parameters
  UM      Summary Report Parameters
  MI      Miscellaneous OE/RR Parameters
  HO      Print Parameters for Hospital
  LO      Print Parameters for Wards/Clinics

You have PENDING ALERTS
      Enter "VA VIEW ALERTS      to review alerts
Select Parameter Edit Option: <Enter>
```

## Requisition/Label Parameters

This option is for editing print parameters for requisitions or labels. A Requisition is a working copy of order(s) that will be sent with the order to the service. It doesn't contain a header or footer.

```
Select Print/Report Parameters Option: RE Requisition/Label Parameters

Requisition/Label Definition for System: OEX.ISC-SLC.VA.GOV
-----
Ward Requisition Format      LAB SERVICE          LAB REQUISITION
                             RADIOLOGY/NUCLEAR MEDICINE CHART COPY BODY
                             MEDICINE              DOCTOR'S ORDERS
                             CONSULT TRACKING
Ward Requisition Header     RADIOLOGY/NUCLEAR MEDICINE CHART COPY HEADER
Ward Requisition Footer     RADIOLOGY/NUCLEAR MEDICINE CHART COPY FOOTER
Ward Label Format            LAB SERVICE          LAB ORDER LABEL
                             RADIOLOGY/NUCLEAR MEDICINE GENERIC ORDER LABEL
                             INPATIENT MEDICATIONS RX LABEL FORMAT
                             MEDICINE              DOCTOR'S ORDERS
-----

For Ward Requisition Format -
Select package: PHARMACY
      1  PHARMACY          PS
Are you adding PHARMACY as a new package? Yes// <Enter>  YES
package: PHARMACY// <Enter>  PHARMACY          PS  PHARMACY

WARD REQUISITION FORMAT: DOCTOR'S ORDERS
For Ward Requisition Format -
Select package:<Enter>

For Ward Requisition Header -
Select package: PHARMACY          PS
Are you adding PHARMACY as a new package? Yes// <Enter>  YES
package: PHARMACY// <Enter>  PHARMACY          PS  PHARMACY
WARD REQUISITION HEADER: RX HEADER

For Ward Requisition Header -
Select package: <Enter>
For Ward Requisition Footer -
Select package: PHARMACY          PS
Are you adding PHARMACY as a new package? Yes// <Enter>  YES
package: PHARMACY// <Enter>  PHARMACY          PS  PHARMACY
WARD REQUISITION FOOTER: RX FOOTER

For Ward Requisition Footer -
Select package: <Enter>
For Ward Label Format -
Select PACKAGE: PHARMACY
Are you adding PHARMACY as a new PACKAGE? Yes// <Enter>  YES

PACKAGE: PHARMACY// <Enter>  PHARMACY          PS  PHARMACY
WARD LABEL FORMAT: RX LABEL FORMAT
For Ward Label Format -
Select PACKAGE: <Enter>
```



## Summary Report Parameters

This option is for editing Summary Report site parameters.

```
CC      Chart Copy Parameters
WC      Work Copy Parameters
SC      Service Copy Parameters
RE      Requisition/Label Parameters
UM      Summary Report Parameters
HO      Print Parameters for Hospital
LO      Print Parameters for Wards/Clinics
```

You have PENDING ALERTS  
Enter "VA VIEW ALERTS" to review alerts

Select Print/Report Parameters Option: **UM** Summary Report Parameters

Summary Report Definition for System: OEX.ISC-SLC.VA.GOV

```
-----
Chart Copy Summary Sort Forward          YES
Work Copy Summary Sort Forward          YES
-----
```

CHART SUMMARY ORDER: YES// ?

Enter YES to have the Chart Copy Summaries sort by forward date/time.

CHART SUMMARY ORDER: YES// ??

This parameter allows the Chart Copy summaries to print in forward chronological order.

CHART SUMMARY ORDER: YES// **<Enter>**

WORK COPY SUMMARY SORT: YES// ?

Enter YES to have the Work Copy Summaries sort by forward date/time.

WORK COPY SUMMARY SORT: YES// ??

This parameter allows the Work Copy summaries to print in forward chronological order.

WORK COPY SUMMARY SORT: YES// **<Enter>**

## Print Parameters for Hospital

This option is for editing hospital-wide print parameters for CPRS.

Select Print/Report Parameters Option: **ho** Print Parameters for Hospital

Miscellaneous Hospital Prints for System: OEX.ISC-SLC.VA.GOV

```
-----
Initials on Summary                      YES
Requisition Sort Field      LAB SERVICE  SAMPLE
Label Sort Field            LAB SERVICE  SAMPLE
Order Summary Sort Forward                      YES
-----
```

PRINT INITIALS ON SUMMARY REPORT: YES// ??

This parameter allows the initials of the person who entered the order to be displayed on the order summary reports. The initials take up an additional line on the display and are shown just below the Ord'd date time.

PRINT INITIALS ON SUMMARY REPORT: YES// **n** NO

For Requisition Sort Field -

Select package: ?

package	Value
LAB SERVICE	SAMPLE

Answer with PACKAGE NAME, or PREFIX, or SYNONYM, or ROUTINE

Do you want the entire 280-Entry PACKAGE List? **n** (No)

Select package: **dietetics** FH

Are you adding DIETETICS as a new package? Yes//<Enter> YES

package: DIETETICS// <Enter> DIETETICS FH DIETETICS

REQUISITION SORT FIELD: ?

Enter the field name to sort requisitions by.

REQUISITION SORT FIELD: ??

This is the field as defined at the ^OR(100,ifn,4.5 level in file 100 to be used to sort requisitions by.

REQUISITION SORT FIELD: dietetics

For Requisition Sort Field -

Select package: **radiology**

1	RADIOLOGY - HL7	RAHL
2	RADIOLOGY PATCH 23	RAAE
3	RADIOLOGY PATCH INIT4	RAAD
4	RADIOLOGY PATCH18 INIT	RAAF
5	RADIOLOGY/NUCLEAR MEDICINE	RA

CHOOSE 1-5: 5 RADIOLOGY/NUCLEAR MEDICINE

For Label Sort Field -

Select package: **dietetics** FH

Are you adding DIETETICS as a new package? Yes//<Enter>

SUMMARY SORT FORWARD: YES// ??

This parameter allows the Order summaries to print in forward chronological order.

SUMMARY SORT FORWARD: YES// <Enter>

## Print Parameters for Wards/Clinics

This option is for editing print parameters for each ward/clinic location.

```
Select Print/Report Parameters Option: LO Print Parameters for Wards/ Clinics
Select HOSPITAL LOCATION NAME: XRAY CLINIC

Print Definition (Loc) for Location: XRAY CLINIC
-----
Chart Copy Print Device                WORK
Prompt for Chart Copy                  DON'T PROMPT
Work Copy Print Device                 WORK
Prompt for Work Copy                   DON'T PROMPT
Requisition Print Device               WORK
Prompt for Requisitions                PROMPT AND ASK DEVICE
Label Print Device                     WORK
Prompt for Labels                      DON'T PROMPT
Daily Order Summary Device             WORK
Service Copy Default Device            RADIOLOGY/NUCLEAR MEDICINE WORK
Print Chart Copy Summary
Print Daily Order Summary
-----
CHART COPY PRINT DEVICE: WORK// ?
Answer with DEVICE NAME, or LOCAL SYNONYM, or $I, or VOLUME SET(CPU), or
SIGN-ON/SYSTEM DEVICE, or SUBTYPE, or FORM CURRENTLY MOUNTED
Do you want the entire DEVICE List? N (No)

CHART COPY PRINT DEVICE: WORK// <Enter>    WORK      OTC      _LTA33:
PROMPT FOR CHART COPY: DON'T PROMPT// ?

Specify how the printing of chart copies will work for this location.
Select one of the following:
      0      DON'T PROMPT
      1      PROMPT AND ASK DEVICE
      2      PROMPT AND NOT ASK DEVICE
      *      DON'T PRINT
PROMPT FOR CHART COPY: DON'T PROMPT// ??

This field allows various levels of user interaction for printing a
chart copy of the orders.
ENTER 0 for no prompts- chart copy is automatically generated.
1 to prompt for chart copy and ask which printer should be used.
2 to prompt for chart copy and automatically print to the
printer defined in the CHART COPY PRINT DEVICE field.
* don't print.
PROMPT FOR CHART COPY: DON'T PROMPT// 1 PROMPT AND ASK DEVICE
WORK COPY PRINT DEVICE: WORK// <Enter>    WORK      OTC      _LTA33:
PROMPT FOR WORK COPY: DON'T PROMPT// 1 PROMPT AND ASK DEVICE
REQUISITION PRINT DEVICE: WORK// <Enter>    WORK      OTC      _LTA33:
PROMPT FOR REQUISITIONS: PROMPT AND ASK DEVICE//<Enter>
LABEL PRINT DEVICE: WORK// LABEL
      1 LABEL PRINTER NAME _LTA9999:
      2 LABEL TABLE INTERMEC 4100 LABEL TABLE _LTA370:
CHOOSE 1-2: 2 INTERMEC 4100
```

### *Print Parameters for Wards/Clinics, cont'd*

```
PROMPT FOR LABELS: DON'T PROMPT// <Enter>
DAILY ORDER SUMMARY DEVICE: WORK// <Enter>   WORK       OTC       _LTA33:

For Service Copy Default Device -
Select PACKAGE: LAB
    1   LAB HL7 OERR                LR70
    2   LAB MESSAGING                LA7
    3   LAB ORDER ENTRY              LRX
    4   LAB PRE-RELEASE OERR_V3      LR02
    5   LAB SERVICE                  LR
Press <RETURN> to see more, '^' to exit this list, OR
CHOOSE 1-5: 3
Are you adding LAB ORDER ENTRY as a new PACKAGE? Yes//<Enter>   YES

PACKAGE: LAB ORDER ENTRY//<Enter> LAB ORDER ENTRY LRX   LAB ORDER ENTRY
SERVICE COPY DEVICE: WORK
    1   WORK WORK                OTC       _LTA33:
    2   WORK SHORT WORK          BOX ROOM   _LTA33:
    3   WORKSTATION              Workstation Redirector   WS.DAT       OER
    4   WORK VIC CARD            REGISTRATION   WORK
CHOOSE 1-4: 1 WORK

For Service Copy Default Device -
Select PACKAGE:<Enter>
PRINT CHART COPY SUMMARY: ?

Specify whether chart copy summary will print for this location.

PRINT CHART COPY SUMMARY: ??

This parameter specifies to the nightly background job ORTASK 24HR CHART
COPIES that a daily Chart Copy summary should be queued to the device
specified by the CHART COPY DEVICE field.

PRINT CHART COPY SUMMARY: YES
PRINT DAILY ORDER SUMMARY: YES

    CC      Chart Copy Parameters
    WC      Work Copy Parameters
    SC      Service Copy Parameters
    RE      Requisition/Label Parameters
    UM      Summary Report Parameters
    HO      Print Parameters for Hospital
    LO      Print Parameters for Wards/Clinics

Select Print/Report Parameters Option:<Enter>
```

## 12. Release/Delete Delayed Orders

This option lets coordinators or IRMS release or cancel delayed orders that haven't been processed for some reason.

Select CPRS Configuration (Clin Coord) Option: **RE** Release/Cancel Delayed Orders

**Ward 1A** Nov 01, 1997 15:08:52 Page: 1 of 1  
Current patient: \*\* No patient selected \*\*

	Patient Name	ID	DOB	Room-Bed
1	DOE,WILLIAM C.	(D6572)	Sep 12, 1944	A-2
2	FEET,SMELL E.	(F1990)	Dec 31, 1951	
3	HOOD,ROBIN	(H2591)	Apr 25, 1931	
4	KIMINATOR,THE	(K3241)	May 06, 1932	
5	LAY,FRITO	(L8333)	Feb 02, 1923	B-5
6	MUFFET,LITTELLA M	(M7689)	Sep 01, 1950	B-4
7	NEW,PATIENT	(N1234)	Apr 04, 1911	

**Enter the number of the patient chart to be opened**

+ Next Screen CV Change View ... FD Find Patient  
- Previous Screen SV Save as Default List Q Close

Select Patient: Close// **5** LAY,FRITO 02-02-23 299388333 YES  
SC VETERAN

Delayed Orders Nov 12, 1997 08:00:51 Page: 1 of 1  
LAY,FRITO 299-38-8333 1A/B-5 FEB 2,1923 (74) <A>  
Selected date range: None Selected

	Item Ordered	Delayed Until
1	ACETAMINOPHEN 325MG Take 2 TABLET(S) PO Q4H Quantity: 100 0 refills	Discharge
2	IBUPROFEN SUSP 1TSP PO Q6H Quantity: 1 0 refills	Discharge

**Enter the numbers of the items you wish to act on.** >>>

+ Next Screen - Previous Screen Q Quit

Select: Quit// **1**

Delayed Orders Nov 12, 1997 08:00:51 Page: 1 of 1  
LAY,FRITO 299-38-8333 1A/B-5 FEB 2,1923 (74) <A>  
Selected date range: None Selected

	Item Ordered	Delayed Until
1	ACETAMINOPHEN 325MG Take 2 TABLET(S) PO Q4H Quantity: 100 0 refills	Discharge
2	IBUPROFEN SUSP 1TSP PO Q6H Quantity: 1 0 refills	Discharge

**Enter the numbers of the items you wish to act on.** >>>

Release to service Cancel Detailed Display

Select action: C Cancel  
Are you sure you want to cancel these order(s)? NO// **YES**  
Deleted

## C. CPRS Configuration (IRM)

### OR PARAM IRM MENU

This menu is only available to those with Programmer access (holders of the XUPROG key). IRMS staff can assign options on this menu at their discretion.

Option	Menu Text	Description
OCX MAIN	Order Check Expert System Main Menu	These options are used for troubleshooting Order Checking and Notifications, for compiling the expert system rules, and for linking local terms with national terms for order checking.
ORMTIME MAIN	ORMTIME Main Menu	These options are intended for IRMS only, and are used in conjunction with the ORTASK routines.
ORE MGR	CPRS Clean-up Utilities	This menu contains an option that checks consistency between lab files and OE/RR files.
XPAR MENU TOOLS	General Parameter Tools	This menu contains general purpose tools for managing parameters.

## 1. Order Check Expert System

Order Checking and Notifications both rely on a subset of CPRS called the Order Check Expert System. This includes a library of rules, elements, and a data dictionary, as well as facilities to maintain these data sets. Eventually the Expert System may be used for clinicians and others to create rules of their own by combining entities, elements, and rules.

### **How it works:**

The Order Check Expert System is based on a set of Rules or Medical Logic Modules (MLM). The term Medical Logic Module, synonymous with rule or frame, is derived from the Arden Syntax, a standard for sharing MLMs and knowledge bases among decision support developers. The Order Check Expert System will support the Arden Syntax and will be able to share knowledge bases with other nonprofit entities.

At this point, the Expert System is mostly used as a compiler and as a tool for monitoring and debugging Order Checking and Notifications. The options on the Order Check Expert System Main Menu can be used to perform these functions.

### ***Compiler***

The compiler generates routines. The OCX post-install routine runs the compiler to generate an initial set of Order Checking routines. The post-install runs the compiler with default compiler options. One of the options is called Execution Trace. The default for this option is NO. When this option is set to YES, the compiler adds write statements to the compiled code that displays various aspects of the runtime environment. It displays information about the runtime datastream as well as the sequence of line labels as the compiled routine set executes. When this option is set to NO it does not add these additional statements. Adding this extra code makes the compiled routines bigger, but, since the compiler has a routine size limit (4k) imposed on it, it tends to make more routines instead. Thus, you may wind up with more routines.

## Order Check Expert System Main Menu

- |   |  |
|---|--|
| 1 | Compile Rules [OCX RUN COMPILER]                           |
| 2 | Expert System Rule Activate/Inactivate [OCX RULE ACTIVATE] |
| 3 | Edit Site Local Terms [OCX LOCAL TERM EDIT]                |
| 4 | Expert System Inquire [OCX EXPERT SYSTEM INQUIRE]          |

## Edit Site Local Terms

After CPRS installation, each site must run this option to link terms used in the expert system to local terms. Some terms like DNR and NPO diet must be mapped to one or more entries in the orderable item file. Other terms like Serum Creatinine must be mapped to the lab test file.

Nat'l Expert System Term	Linked File	Order Check
SERUM CREATININE	LAB [60]	AMINOGLYCOSIDE ORDERED
		BIOCHEM ABNORMALITY FOR CONTRAST MEDIA
		ESTIMATED CREATININE CLEARANCE
		RENAL FUNCTIONS OVER AGE 65
SERUM UREA NITROGEN	LAB [60]	AMINOGLYCOSIDE ORDERED
		BIOCHEM ABNORMALITY FOR CONTRAST MEDIA
		ESTIMATED CREATININE CLEARANCE
		RENAL FUNCTIONS OVER AGE 65
ANGIOGRAM,CATH – PERIPHERA	OI [101.43]	MISSING LAB TESTS FOR ANGIOGRAM PROCEDUR
PROTHROMBIN TIME	OI [101.43]	MISSING LAB TESTS FOR ANGIOGRAM PROCEDUR
THROMBOPLASTIN TIME PARTIA	OI [101.43]	MISSING LAB TESTS FOR ANGIOGRAM PROCEDUR
WHITE BLOOD COUNT (WBC)	LAB [60]	CLOZAPINE APPROPRIATENESS
BLOOD SPECIMEN	TOPOG [61]	CLOZAPINE APPROPRIATENESS
SERUM SPECIMEN	TOPOG [61]	AMINOGLYCOSIDE ORDERED
		BIOCHEM ABNORMALITY FOR CONTRAST MEDIA
		ESTIMATED CREATININE CLEARANCE
		RENAL FUNCTIONS OVER AGE 65



## Edit Site Local Terms Example

```
Select OPTION NAME: OCX MAIN          Order Check Expert System Main Menu

1      Compile Rules
2      Expert System Rule Activate/Inactivate
3      Edit Site Local Terms
4      Expert System Inquire

Select Order Check Expert System Main Menu Option: 3  Edit Site Local
Terms

    Order Check National Terms
        SERUM CREATININE
        SERUM UREA NITROGEN
        DNR
        PROTHROMBIN TIME
        THROMBOPLASTIN TIME PARTIAL
        NPO
        SERUM SPECIMEN
        PARTIAL THROMBOPLASTIN TIME
        ANGIOGRAM (PERIPHERAL)
        WBC

        < Enter ?? to see the rest of the national terms on this list>

Select National Term: PROTHROMBIN TIME

National Term: PROTHROMBIN TIME

    Translated from file: 'LABORATORY TEST'  60

    Select LABORATORY TEST NAME: PT
        467    PT
Select LABORATORY TEST name: <Enter>
```

After you exit *Edit Site Local Terms*, the Expert System automatically runs the compiler. When the compiler is finished, the following e-mail message is automatically sent:

## Mail Message

```
Subj: Order Check Compiler Status  [#16691] 13 Jan 98 10:53  14 Lines
From: POSTMASTER (Sender: GREEN,JOANN)  in 'IN' basket.   Page 1  **NEW**
-----

The Order Check routine compiler has completed normally
on JAN 13,1998 at 10:53 by [15]  GREEN,JOANN.

    ORDER CHECK EXPERT version 1.0 (rev15) released DEC 15,1997 at 12:18

        Elapsed time: 6 minutes 50 seconds
            Queued
                Execution Trace Mode:  ON
                Elapsed time Logging Mode:
                Raw Data Logging Mode:  ON  Keep data for 3 days then purge.
                Lines of code generated: 7835

Select MESSAGE Action: IGNORE (in IN basket)//
```

## Expert System Inquire

This option lets you display the components that make up the rules that control order checking and notifications.

```
1      Compile Rules
2      Expert System Rule Activate/Inactivate
3      Edit Site Local Terms
4      Expert System Inquire

Select Order Check Expert System Main Menu Option: 4  Expert System Inquire

                        Expert System Display

                        Display a Rule

                        Display an Element

                        Display a Data Field

Option List -> Element, Field, Rule

Choose an Option: R
Select ORDER CHECK RULE NAME: ?
Answer with ORDER CHECK RULE NAME
Do you want the entire 38-Entry ORDER CHECK RULE List? Y  (Yes)
Choose from:
ABNORMAL LAB RESULTS
ALLERGY - CONTRAST MEDIA REACTION
AMINOGLYCOSIDE ORDER
BIOCHEM ABNORMALITIES/CONTRAST MEDIA CHECK
CLOZAPINE
CONCURRENT LAB ORDERS FOR ANGIOGRAM, CATH - PERIPHERAL
CONSULT/REQUEST CANCELED/HELD          ***INACTIVE
CONSULT/REQUEST RESOLUTION             ***INACTIVE
CREATININE CLEARANCE ESTIMATION
CRITICAL HIGH LAB RESULTS
CRITICAL LOW LAB RESULTS
CT OR MRI PHYSICAL LIMIT CHECK
FOOD/DRUG INTERACTION
GLUCOPHAGE - CONTRAST MEDIA
IMAGING REQUEST CANCELLED/HELD
LAB ORDER CANCELLED
LAB RESULTS
NEW ORDER PLACED
NPO DIET FOR MORE THAN 72 HOURS          ***INACTIVE
ORDER FLAGGED FOR CLARIFICATION
ORDER REQUIRES CHART SIGNATURE
ORDER REQUIRES CO-SIGNATURE
ORDER REQUIRES ELECTRONIC SIGNATURE
ORDERABLE ITEM MESSAGE
ORDERER FLAGGED RESULTS AVAILABLE
PATIENT ADMISSION
PATIENT DISCHARGE
PATIENT TRANSFERRED FROM PSYCHIATRY TO ANOTHER UNIT
POLYPHARMACY
RECENT BARIUM STUDY
RECENT CHOLECYSTOGRAM ORDER
RENAL FUNCTIONS OVER AGE 65 CHECK
SERVICE ORDER REQUIRES CHART SIGNATURE
SITE FLAGGED ORDER
SITE FLAGGED RESULT
```

## Order Check Expert System, cont'd

```
STAT ORDER PLACED
STAT RESULTS AVAILABLE
ZZ TEST RULE      ***INACTIVE

Select ORDER CHECK RULE NAME: L
    1  LAB ORDER CANCELLED
    2  LAB RESULTS
CHOOSE 1-2: 2
DEVICE: HOME// <Enter> ALPHA

Rule: LAB RESULTS (ACTIVE Status)

Rule Element Label: HL7 LAB RESULTS
    Element: HL7 FINAL LAB RESULT

    Event-Element Name: HL7 FINAL LAB RESULT
        Data Context: GENERIC HL7 MESSAGE ARRAY
        Compiled Routine:
            Expression #3: IF |CONTROL CODE| EQUALS ELEMENT IN SET'RE'
            Expression #4: IF |FILLER| STARTS WITH 'LR'
            Expression #5: IF |REQUEST STATUS (OBR)| EQ FREE TEXT'F'

        Data Field Name: CONTROL CODE
        Abbreviation:
        Data Context: GENERIC HL7 MESSAGE ARRAY

            Metadictionary Link: PATIENT.HL7_CONTROL_CODE
            Attribute: HL7 CONTROL CODE
            Data Type: FREE TEXT
            OCXO VARIABLE NAME: OCXODATA("ORC",1)
            OCXO UP-ARROW PIECE NUMBER: 1
            OCXO DATA DRIVE SOURCE: HL7

        Data Field Name: FILLER
        Abbreviation: FILL
        Data Context: GENERIC HL7 MESSAGE ARRAY

            Metadictionary Link: PATIENT.HL7_FILLER
            Attribute: HL7 FILLER
            Data Type: FREE TEXT
            OCXO UP-ARROW PIECE NUMBER: 2
            OCXO VARIABLE NAME: OCXODATA("ORC",3)
            OCXO DATA DRIVE SOURCE: HL7

        Data Field Name: REQUEST STATUS (OBR)
        Abbreviation:
        Data Context: GENERIC HL7 MESSAGE ARRAY

            Metadictionary Link: PATIENT.HL7_REQUEST_STATUS
            Attribute: REQUEST STATUS
            Data Type: FREE TEXT
            OCXO VARIABLE NAME: OCXODATA("OBR",25)
            OCXO UP-ARROW PIECE NUMBER: 1
            OCXO DATA DRIVE SOURCE: HL7

Relation Expression: HL7 LAB RESULTS
    Notification: LAB RESULTS
    Notification Message: Lab results: |ORDERABLE ITEM NAME|

    Data Field Name: ORDERABLE ITEM NAME
    Abbreviation:
    Data Context: DATABASE LOOKUP
```

### *Order Check Expert System, cont'd*

Metadictionary Link: PATIENT.ORD\_ITEM\_NAME

Attribute: ORDERABLE ITEM

Data Type: FREE TEXT

OCXO EXTERNAL FUNCTION CALL: ORDITEM(|ORDER NUMBER|)

Press <enter> to continue... **<Enter>**

Expert System Display

Display a Rule

Display an Element

Display a Data Field

Option List -> Element, Field, Rule

Choose an Option:

## 2. ORMTIME and Job Tasking

ORMTIME is a background processor that is used in conjunction with the ORTASK routines to manage background jobs for order processing. They are intended for IRMS only.

ORMTIME is automatically scheduled once the Orders conversion is done. REQUEUE^ORMTIME is called from CLEANUP^OR3CONV1, which occurs when the conversion completes.

The following notifications/alerts are triggered via ORMTIME. If ORMTIME is not running/queued, they will not be sent.

DNR Expiring  
Medications Expiring  
NPO Diet > 72 Hours  
Unverified Medication Order  
Unverified Order

### ORMTIME Main Menu [ORMTIME MAIN]

This menu contains options that are used for managing ORMTIME.

**NOTE:** As of 12/98, these options are not exported.

Option	Name	Description
Reschedule Background Processor	ORMTIME REQUEUE BACKGROUND JOB	Use this option to Queue or Requeue ORMTIME. It is safe to run this option if ORMTIME is already queued. There is a check in the queueing code to see if the job is already queued and will not queue another if it finds one already there.
Get Background Job Status	ORMTIME BACKGROUND JOB STATUS	This option gives a status report of when ORMTIME last ran and also indicates when it is next scheduled to run. It also indicates when each of the seven ORMTIME failsafe jobs are supposed to run.
Kill all ORMTIME Taskman Tasks	ORMTIME KILL ALL TASKS	This option is used to stop ORMTIME and all of its failsafe jobs. BE VERY CAREFUL WITH THIS OPTION. There are several Expert System purges that depend on ORMTIME and if ORMTIME is not running then the Expert System will eventually fill up the Volume Set it resides in.

## ORTASK Routines

Schedule the following tasks, as appropriate for your site:

Routine	Name	Description
ORTASK 24HR CHART COPIES	Task 24hr Chart Copy Print by Location	run routine
ORTASK 24HR SUMMARY	Task 24hr Chart Copy Print by Location	run routine

### Example

```
Select Taskman Management Option: schedule/Unschedule Options
Select OPTION to schedule or reschedule: ortask 24HR CHART COPIES
Task  24hr Chart Copy Print by Location      run routine
      ...OK? Yes// <Enter>      (Yes)
Edit Option Schedule
  Option Name: ORTASK 24HR CHART COPIES
  Menu Text: Task 24hr Chart Copy Print by Lo      TASK ID: 385010
_____

  QUEUED TO RUN AT WHAT TIME: OCT 18,1997@00:05

DEVICE FOR QUEUED JOB OUTPUT: WORK;P-DOC132;132;64

  QUEUED TO RUN ON VOLUME SET:

      RESCHEDULING FREQUENCY: 1D

          TASK PARAMETERS:

              SPECIAL QUEUEING:

_____
COMMAND:                                     Press <PF1>H for help      Insert
```

### 3. CPRS Clean-up Utilities

#### Lab-OE/RR Inconsistency Checker

Check Lab orders from file 100 to 69 [ORE LAB ORDERS CHECK 100=>69]

This option does a number of consistency checks between OE/RR's Order file (100) and Lab's Order file (69). It was originally developed as a programmer's utility to check the integrity of data between the two applications. Later, code was added to correct the inconsistencies. It has proved useful to sites in troubleshooting and correcting problems. Some of the problems, such as incorrect status updates, have been occurring since the previous version of OE/RR. Other problems happen as a result of system crashes or errors during the ordering process.

This option gathers information without making any changes to the database. It takes a long time to run—several hours to several days—depending on the size of the global, so it would be best to run this at night or on the weekend.

The program starts by looping through all the entries in the Orders file (100). It checks to make sure that required global nodes are present. If the nodes are unrecognized or beyond repair, they are simply removed, so that programs that expect this data to exist do not crash. Checks for missing or invalid pointers are made and corrected. The status of the order in the Orders file (100) is compared to the status in the Lab files and corrected if necessary. Incorrect OE/RR statuses have been a problem in the past. This option is what has been used to make things consistent.

The answers you give to several questions affect the way this option affects the database. Here are explanations of these questions:

*1. Any problems will be displayed. Continue?*

This question allows the user to get out of the option before doing anything, after reviewing the help text.

*2. Check for CPRS orders that no longer exist in the Lab Order file?*

Answering YES to this question causes the links between OE/RR and Lab to be checked. If the link is gone, and the order has not gone to completion or has been cancelled, then the order's status is changed to cancelled. Answering NO leaves the status alone.

*3. Do you want to remove old PENDING, ACTIVE and UNRELEASED orders?*

Answering YES to this question affects orders with a status of pending, active, and unreleased, that also have a start date in the past. The user gets to pick how far back to start looking for those start dates. Old Unreleased orders are removed from the system. Old pending orders are changed to a Lapsed status, which will remove them from the current orders context. Active orders that no longer have corresponding entries in the lab files are changed to a status of Lapsed.

*4. OK, which ORIFN do you want to start with: 0//*

This question allows you to select a starting point in the Orders file (100) to begin checking. ORIFN is the internal entry number in file 100 to start with [ ^OR(100,ORIFN) ]. This is useful if you only want to check entries recently added to the file. For example, you might suspect a recent patch might have affected the way a status is updated in OE/RR files. You

could find a starting point in file 100 about the same time the patch was installed and start checking orders from that point. Looking at the 3<sup>rd</sup> '^' piece of the global ^OR(100,0) will give you the last entry in file 100.

*5. Do you want me to correct the inconsistencies now?*

Answering YES to this question will correct any problems that can be corrected. Answering NO will not correct the problem, but it will display a message when a problem is found.

At the end of the report, any problems found will be totaled and displayed.

If you have never run this option, it should be done at your earliest convenience. After that, it can be run as often as once a month or as little as once a year, unless otherwise instructed. If your site is journaling the ^OR global and you have not run this option for a very long time, special precautions may need to be taken. Most of the corrections are status updates. A status update would make approximately three entries in a journal file. To get an idea of the total impact on the journal, run this option once without correcting the inconsistencies, take the total number of inconsistencies, and multiply by three. This should give you a general idea of how many sets and kills will be added to the journal; then you can adjust the journal space accordingly.

**Example**

```
Select CPRS Manager Menu Option: IR  CPRS Configuration (IRM)
OC   Order Check Expert System Main Menu ...
      UT   CPRS Clean-up Utilities ...

Select CPRS Configuration (IRM) Option: UT  CPRS Clean-up Utilities
LA   Lab Order Checks ...

Select CPRS Clean-up Utilities Option: LA  Lab Order Checks
  1   Check Lab orders from file 69 to 100
      **> Out of order:  UNDER CONSTRUCTION
  2   Check Lab orders from file 100 to 69

Select Lab Order Checks Option: 2  Check Lab orders from file 100 to 69
This utility will look for inconsistencies between OE/RR 3.0 and Lab files.
It will compare records in the Orders file (100) with the Lab Order file
(69).

Problems identified                      Resolution
-----
^OR(100,IFN,0) does not exist           ^OR(100,IFN) killed
Bad pointers on child orders            Pointers removed
Child orders with no parent order       Pointer removed
Child order missing parent pointer      Pointer restored
Incorrect status on parent order        Status corrected
Old veiled orders                      Purged
Unrecognized pointer to file 69          Order cancelled
Unconverted orders from OE/RR 2.5       Order lapsed
Invalid pointer to file 69              Order cancelled
```



### *CPRS Clean-up Utilities, cont'd*

Incorrect status on uncollected specimens	Status updated
Incorrect status on completed orders	Status updated
Missing reference to file 69	Cancelled (optional)
Old pending, active & unreleased orders	Status changed

Any problems will be displayed. Continue? No// **Y** (Yes)

Check for CPRS orders that no longer exist in the Lab Order file? No// **Y** (Yes)

Do you want to remove old PENDING, ACTIVE and UNRELEASED orders? No// **?**

Unreleased orders are removed from the system.

Old pending orders are changed to a Lapsed status, which will remove them from the current orders context.

Active orders that no longer have corresponding entries in the lab files are changed to Lapsed

Do you want to remove old PENDING, ACTIVE and UNRELEASED orders? No// **Y** (Yes)

Remove old orders with Start dates before: T-30// **<Enter>** (AUG 29, 1998)

Do you want me to correct the inconsistencies now? No// **Y** (Yes)p

2.2=>GLUCOSE BLOOD S<2961022.115121>6<Didn't get converted, NOT IN 69

5.2=>DIGOXIN BLOOD S<2961022.131419>6<Didn't get converted, NOT IN 69

12.2=>DIGOXIN BLOOD S<2961029.154314>6<Didn't get converted, NOT IN 69

23.2=>PT {Profile} B<2961031.164613>6<Didn't get converted, NOT IN 69

24.2=>COAGULATION (PT<2961031.164613>6<Didn't get converted, NOT IN 69

32.2=>COAGULATION (PT<2961101.095846>6<Didn't get converted, NOT IN 69

34.2=>SMAC (CHEM 20) <2961101.101734>6<Didn't get converted, NOT IN 69

37.2=>COAGULATION (PT<2961101.101814>6<Didn't get converted, NOT IN 69

89.1=>CHOLESTEROL BLO<2941129.154843>6<Didn't get converted, NOT IN 69

90.1=>GLUCOSE BLOOD S<2941129.154843>6<Didn't get converted, NOT IN 69

91.1=>HDL BLOOD SERUM<2941129.154843>6<Didn't get converted, NOT IN 69

96.1=>CHOLESTEROL BLO<2941129.155258>6<Didn't get converted, NOT IN 69

97.1=>GLUCOSE BLOOD S<2941129.155258>6<Didn't get converted, NOT IN 69

101.1=>TRANSFUSION REQ<2950120.120443>6<Status should be Complete

102.1=>TRANSFUSION REQ<2950120.125307>6<Status should be Complete

178=>OCCULT BLOOD (S<2911120.0936>5<Status should be Complete

277=>CHOLESTEROL BLO<2911120.154>5<Status should be Complete

278=>GLUCOSE BLOOD S<2911120.154>5<Status should be Complete

281=>GLUCOSE BLOOD S<2911121.1127>5<Status should be Complete

304=>TRANSFUSION REQ<2931217.1327>5<Status should be Complete

306=>Consult to PULM<><No package defined

307=>Consult to PULM<><No package defined

308=>Consult to PULM<><No package defined

309=>Consult to PULM<><No package defined

310=>Consult to PULM<><No package defined

311=>Consult to PULM<><No package defined

394=>CHEM 7 BLOOD SE<2980317.142517>6<Status should be Complete

409=>CO2 BLOOD SERUM<2980317.142527>6<Status should be Complete

445=>TRANSFUSION REQ<2980317.144511>6<Status should be Complete

472=>CO2 BLOOD SERUM<2980611.120016>6<Status should be Complete

560=>GLUCOSE BLOOD S<2980616.142934>6<Status should be Complete

Total inconsistencies: 221

Old Pending orders total: 185

Old Unreleased orders total: 5

Unconverted 2.5 orders total: 13

Status should be complete: 12

## 4. General Parameter Tools

Options on this menu let you display or edit the values for selected parameters, entities, packages, and templates. You can also create Add Orders menus or add order menus to the orders list in the GUI.

The Parameter File (8989.1) has four fields:

Entity	The person, place, or thing the parameter is being defined for
Parameter	The definition of this particular parameter
Instance	For multi-division or integrated sites
Value	What you define or set for this parameter

Name	Text	Definition
XPAR LIST BY PARAM	List Values for a Selected Parameter	This option prompts for a parameter (defined in the PARAMETER DEFINITION file) and lists all value instances for that parameter.
XPAR LIST BY ENTITY	List Values for a Selected Entity	This option prompts for the entry of an entity (location, user, etc.) and lists all value instances for that entity.
XPAR LIST BY PACKAGE	List Values for a Selected Package	This option prompts for a package and lists all parameter values for the selected package.
XPAR LIST BY TEMPLATE	List Values for a Selected Template	This option prompts for a parameter template. Depending on the definition of the template, additional information may be prompted for and then the parameter values defined by the template are displayed.
XPAR EDIT PARAMETER	Edit Parameter Values	The option calls the low level parameter editor, which allows you to edit the values for every parameter. Normally packages supply other means of editing parameters.
XPAR EDIT BY TEMPLATE	Edit Parameter Values with Template	This option prompts for a Parameter Template and then uses the selected template to edit parameter values.

## List Values for a Selected Parameter

```
Select CPRS Configuration (IRM) Option: XX  General Parameter Tools

  LV      List Values for a Selected Parameter
  LE      List Values for a Selected Entity
  LP      List Values for a Selected Package
  LT      List Values for a Selected Template
  EP      Edit Parameter Values
  ET      Edit Parameter Values with Template

Select General Parameter Tools Option: LV  List Values for a Selected
Parameter
Select PARAMETER DEFINITION NAME:  ORPF SERVICE COPY FORMAT           Service
Copy Format

Values for ORPF SERVICE COPY FORMAT

SYS: OEX.ISC-SLC.VA.GOV           PHARMACY                DOCTOR'S ORDERS
SYS: OEX.ISC-SLC.VA.GOV           LAB SERVICE              DOCTOR'S ORDERS
SYS: OEX.ISC-SLC.VA.GOV           RADIOLOGY/NUCLEAR ME    DOCTOR'S ORDERS
SYS: OEX.ISC-SLC.VA.GOV           OUTPATIENT PHARMACY    DOCTOR'S ORDERS
SYS: OEX.ISC-SLC.VA.GOV           CONSULT/REQUEST TRAC  CONSULTATION BODY
SYS: OEX.ISC-SLC.VA.GOV           CONSULT TRACKING      CONSULTATION BODY

Enter RETURN to continue or '^' to exit:
```

## List Values for a Selected Template

List templates have been created for many parameters, to ensure a consistent format for displaying and editing parameters. You can view the default values or local settings for any of these templates through these options.

Select General Parameter Tools Option: **List Values for a Selected Template**

Select PARAMETER TEMPLATE NAME: ?

Answer with PARAMETER TEMPLATE NAME

Do you want the entire 23-Entry PARAMETER TEMPLATE List? **y** (Yes)

Choose from:

LR DOMAIN	Lab Domain Level Parameters
LR LOC	Lab Location Level Parameters
LR PKG	Lab Package Level Parameters
ORP CHART COPY	Chart Copy Definition
ORP ORDER MISC	Miscellaneous OE/RR Definition
ORP PRINTS (HOSP)	Miscellaneous Hospital Prints
ORP PRINTS (LOC)	Print Definition (Loc)
ORP REQUISITIONS/LABELS	Requisition/Label Definition
ORP SERVICE COPY	Service Copy Definition
ORP SUMMARY REPORTS	Summary Report Definition
ORP WORK COPY	Work Copy Definition
ORQQ SEARCH RANGE (DIVISION)	GUI Cover Sheet - Division
ORQQ SEARCH RANGE (LOCATION)	GUI Cover Sheet - Location
ORQQ SEARCH RANGE (SERVICE)	GUI Cover Sheet - Service
ORQQ SEARCH RANGE (SYSTEM)	GUI Cover Sheet - System
ORQQ SEARCH RANGE (USER)	GUI Cover Sheet - User
XPAR TEST 2	TEST 2
XPAR TEST TEMPLATE	Parameter Tools Test Template
ZZORQQ SEARCH RANGE (DIVISION)	GUI Cover Sheet - Division
ZZORQQ SEARCH RANGE (LOCATION)	GUI Cover Sheet - Location
ZZORQQ SEARCH RANGE (SERVICE)	GUI Cover Sheet - Service
ZZORQQ SEARCH RANGE (SYSTEM)	GUI Cover Sheet - System
ZZTEST	GUI Cover Sheet Display Parm U

Select PARAMETER TEMPLATE NAME: **ORP ORDER MISC**      Miscellaneous  
OE/RR Definition

Miscellaneous OE/RR Definition for System: OEX.ISC-SLC.VA.GOV

Active Orders Context Hours	24
Auto Unflag	YES
Confirm Provider	YES (Exclude ORES)
Default Provider	YES
Error Days	2
Grace Days before Purge	30
Restrict Requestor (OREMAS)	YES (ORELSE &
Review on Patient Movement	YES
Show Status Description	YES
Signed on Chart Default	NO

Enter RETURN to continue or '^' to exit:

## Disabling Ordering per User

You can use *General Parameter Tools* to disable ordering for individual users, if you have access to this option; otherwise, get an IRMS specialist to help you.

```
Select OPTION NAME: ORMGR                CPRS Manager Menu      menu

  CL      Clinician Menu ...
  NM      Nurse Menu ...
  WC      Ward Clerk Menu ...
  PE      CPRS Configuration (Clin Coord) ...
  IR      CPRS Configuration (IRM) ...
Select CPRS Manager Menu Option: IR  CPRS Configuration (IRM)
  OC      Order Check Expert System Main Menu ...
  TI      ORMTIME Main Menu ...
  UT      CPRS Clean-up Utilities ...
  XX      General Parameter Tools ...
Select CPRS Configuration (IRM) Option: XX  General Parameter Tools
  LV      List Values for a Selected Parameter
  LE      List Values for a Selected Entity
  LP      List Values for a Selected Package
  LT      List Values for a Selected Template
  EP      Edit Parameter Values
  ET      Edit Parameter Values with Template
Select General Parameter Tools Option: EP  Edit Parameter Values

Select PARAMETER DEFINITION NAME: ORWOR DISABLE ORDERING      Disable
Ordering in GUI

ORWOR DISABLE ORDERING may be set for the following:

      2   User          USR      [choose from NEW PERSON]
      5   System        SYS      [OEX.ISC-SLC.VA.GOV]
     10   Package       PKG      [ORDER ENTRY/RESULTS REPORTING]

Enter selection: 2 User      NEW PERSON
Select NEW PERSON NAME: FROMMATER,RANDY          RAF          COMPUTER TYPE

--- Setting ORWOR DISABLE ORDERING  for User: FROMMATER,RANDY-----
Disable Ordering: ?

Enter 'Yes' if you wish to disable ordering and order action in the GUI.

Disable Ordering: YES

ORWOR DISABLE ORDERING may be set for the following:

      2   User          USR      [choose from NEW PERSON]
      5   System        SYS      [OEX.ISC-SLC.VA.GOV]
     10   Package       PKG      [ORDER ENTRY/RESULTS REPORTING]

This will disable all BUT NEW PROBLEM, NEW NOTE, and NEW DISCHARGE SUMMARY
```

## Creating or adding to the Write Orders list

The parameters that control the "Write Orders" list are edited via the General Parameter Tools menu (XPAR MENU TOOLS).

### Using *General Parameter Tools* on the CPRS Configuration menu (IRM)

1. Use the *List Values for a Selected Parameter* option to see how the parameter for the write orders list is exported (the package level of the parameter ORWOR WRITE ORDERS LIST).
2. Use *Edit Parameter Values*, select ORWOR WRITE ORDERS LIST.
3. Select "System" to enter the dialogs and menus that you want to appear in the list at your site.

### Using Order Menu Management - *Enter/edit order menus* on the CPRS configuration menu (Clin Coord).

1. Create a new menu. Remember, this menu will be what shows up in the list box on the left side of the orders tab, so it should be a single column. You can put what you want in this list. The idea was that it would contain the most common ordering menus and dialogs to which a user needs access.
2. After creating the menu, use *Edit Parameter Values* and select ORWDX WRITE ORDERS LIST as the parameter.
3. Select "System" and enter the menu you just created as the value. You can override by exception what you set for the system level by setting the parameter for a particular division or user. The ORWDX WRITE ORDERS LIST parameter takes precedence over the ORWOR WRITE ORDERS LIST parameter, if both are present.

You can find what was on the "Write Orders" list to start with by using the parameter tools menu (XPAR MENU TOOLS), selecting List Values for a selected parameter, and entering ORWOR WRITE ORDERS LIST as the parameter. The exported list will be preceded by PKG. If the list has been modified at your site, each item will be preceded by SYS. If a list has been set up for a specific user, it will be preceded by USR.

The "Write Orders" list, as exported, contains the following dialogs:

Sequence	Value	Display Name
30	FHW1	Diet
52	PSJ OR PAT OE	Meds, Inpatient
55	PSO OERR	Meds, Outpatient
58	PSJI OR PAT FLUID OE	IV Fluids
60	LR OTHER LAB TESTS	Lab Tests
70	RA OERR EXAM	Radiology
80	GMRCOR CONSULT	Consult
85	GMRCOR REQUEST	Procedure
90	GMRVOR	Vitals
99	OR GXTEXT WORD PROCESSING ORDER	Text Only Order

The sequence is just an arbitrary number to indicate the order that the dialog should be in the list.

```

Select OPTION NAME: ORMGR          CPRS Manager Menu      menu

CL      Clinician Menu ...
NM      Nurse Menu ...
WC      Ward Clerk Menu ...
PE      CPRS Configuration (Clin Coord) ...
IR      CPRS Configuration (IRM) ...

Select CPRS Manager Menu Option: IR  CPRS Configuration (IRM)

OC      Order Check Expert System Main Menu ...
TI      ORMTIME Main Menu ...
UT      CPRS Clean-up Utilities ...
XX      General Parameter Tools ...

Select CPRS Configuration (IRM) Option: XX  General Parameter Tools

LV      List Values for a Selected Parameter
LE      List Values for a Selected Entity
LP      List Values for a Selected Package
LT      List Values for a Selected Template
EP      Edit Parameter Values
ET      Edit Parameter Values with Template

Select General Parameter Tools Option: EP  Edit Parameter Values
      --- Edit Parameter Values ---

Select PARAMETER DEFINITION NAME: ORWDX WRITE ORDERS LIST      Menu for Write
Orders List

ORWDX WRITE ORDERS LIST may be set for the following:

      2   User          USR      [choose from NEW PERSON]
      7   Division     DIV      [REGION 5]
      8   System       SYS      [OEX.ISC-SLC.VA.GOV]

Enter selection: 2 User      NEW PERSON
Select NEW PERSON NAME: GREEN,JOANN          jg

----- Setting ORWDX WRITE ORDERS LIST for User: GREEN,JOANN -----
Order Dialog: ??

Choose from:
FHWMENU
GMRVORMENU
OR ADD MENU CLINICIAN
OR GMENU ACTIVITY ORDERS
OR GMENU ORDER SETS
OR GMENU OTHER ORDERS
OR GMENU PATIENT CARE ORDERS
OR GXMOVE PATIENT MOVEMENT
ORZ WHATEVER
ZZCURTIS
ZZJFR MENU
ZZJFR TEST MENU
ZZKCM MENU
ZZKCM MENU 1
ZZMARCIA
ZZMEL MENU
ZZRV1

Order Dialog: ZZMEL MENU

```

## D. Other CPRS Configuration

### List Manager Terminal Setup

Check the List Manager Attributes file. You may need to update the Terminal Type file for the VT100's. If the "Insert Line" field is empty, this will cause List Manager to revert back to scroll mode.

List Manager uses 11 video attributes, which are in the Terminal Type file (#3.2). These are listed (along with recommended values) in the Site Preparation section of the *List Manager Developer's Guide* (can be found at: <http://152.127.1.95/softserv/infrastr.uct/listman/docs/hh/index.html>).

Attribute	Value for a VT series terminal
Form Feed	#, \$C(27,91,50,74, 27,91,72)
XY CRT	W , \$C(27,91)_((DY+1))_\$C(59)_((DX+1))_\$C(72)
Erase to End of Page	\$C(27,91,74)
Insert Line	\$C(27), "[L"
Underline On	\$C(27,91,52,109)
Underline Off	\$C(27,91, 109)
High Intensity	\$C(27,91,49,109)
Normal Intensity	\$C(27,91,109)
Save Cursor Pos	\$C(27,55)
Restore Cursor Pos	\$C(27,56)
Set Top/Bottom Marg	\$C(27,91)_(+IOTM)_ \$C(59)_(+IOBM)_ \$C(114)



## Nature of Order File

Entries in this file determine the actions that are to be taken based on the nature of an order or change to an order.

☞ **NOTE:** *This file shouldn't be added to or deleted from.*

### Nature of Order names

WRITTEN  
VERBAL  
TELEPHONED  
SERVICE CORRECTION  
POLICY  
DUPLICATE  
REJECTED  
PHYSICIAN ENTERED  
AUTO  
CHANGED  
MAINTENANCE

The file is initially populated with data that seems the most appropriate.  
We recommend that you review the entries after CPRS is installed, and, if necessary, modify it to meet your site needs.

### Example

```
>D P^DI
Select OPTION: eNTER OR EDIT FILE ENTRIES
INPUT TO WHAT FILE: NATURE OF ORDER
EDIT WHICH FIELD: ALL// <Enter>
Select NATURE OF ORDER NAME: verbal          V
CODE: V// <Enter>
NON-INTERACTIVE: INTERACTIVE// ??
    This field identifies this entry for interactive or non-interactive
    use.
    Choose from:
        0          INTERACTIVE
        1          NON-INTERACTIVE
NON-INTERACTIVE: INTERACTIVE// <Enter>
INACTIVE: ??
    This field is used to inactivate a nature of order.
    Choose from:
        0          ACTIVE
        1          INACTIVE
INACTIVE: <Enter>
FRONT/BACKDOOR: both// ??
    This field is used to identify entries that are used during an OE/RR
    dialog (frontdoor), and entries that are used by ancillary services
    (backdoor).
    Choose from:
        F          frontdoor
        B          backdoor
        X          both
FRONT/BACKDOOR: both// <Enter>
```

### *Nature of Order File, cont'd*

```
DC ONLY: NO// ?
    Enter YES if this entry is only used for DC actions.
    Choose from:
        1      YES
        0      NO
DC ONLY: NO// <Enter>
CREATE ACTION: YES// ??
    This field determines if an entry will be created in the Order Action
    multiple for this order; if not, then only a status update will occur.
    Choose from:
        0      NO
        1      YES
CREATE ACTION: YES// <Enter>
PRINT CHART COPY: YES// ??
    This field determines if this entry/action should generate a Chart copy.
    Choose from:
        0      NO
        1      YES
PRINT CHART COPY: YES// <Enter>
PRINT DAILY SUMMARY: YES// ??
    This field determines if this entry/action should appear on the
    Daily Order Summary.
    Choose from:
        0      NO
        1      YES
PRINT DAILY SUMMARY: YES// <Enter>
DEFAULT SIGNATURE STATUS: NOT SIGNED// ??
    This is the signature status that will be assigned to an order having
    this nature; if a signature is not applicable, this field should be
    null.
    Choose from:
        0      ON CHART w/written orders
        1      ELECTRONIC
        2      NOT SIGNED
        3      NOT REQUIRED
        4      ON CHART w/printed orders
        5      NOT REQUIRED due to cancel
        6      SERVICE CORRECTION to signed order
DEFAULT SIGNATURE STATUS: NOT SIGNED// <Enter>
PRINT WORK COPY: ??
    This field determines if this entry/action should generate a Work Copy.
    Choose from:
        0      NO
        1      YES
PRINT WORK COPY: <Enter>

Select NATURE OF ORDER NAME: <Enter>
```

## E. CPRS Hardware & Software Requirements and Recommendations

The following information contains recommendations for workstations, servers, and cabling plants. These recommendations are for requirements beyond the basic upgrading of the facility's main computer cluster to the newer DEC Alpha systems to provide the additional capacity needed to run CPRS and related packages (e.g. TIU, PCMM, PDM),

VHA facilities are encouraged to budget and purchase PC workstations as replacements for dumb terminals. The VHA LAN and Workstation Requirements task force report should be used too as a guide.

NOTE: The List Manager interface, non-GUI version, of CPRS does not require a PC workstation.

### Workstation Hardware

#### *Economical configuration*

- CPU: Pentium 120 MHz or 133 MHz (with upgradeable motherboard). In addition to a faster CPU, the 133 MHz CPU has a faster bus speed of 66 MHz, rather than the 60 MHz bus speed of the 120 MHz CPU.
- RAM: 16MB RAM for Windows 95, 24 or 32 MB RAM for NT Workstation. Viewing of 2K by 2K Radiology images will respond faster with 32MB, for instance.
- BUS: ISA and PCI (typically 3 16-bit ISA and 3 32-bit PCI)
- Graphics accelerator: PCI bus, SVGA 1024 x 768, 256 colors with 2MB RAM (4MB VRAM or WRAM for fast true color imaging at 1024 x 768 x 24 bit / 16.7 million colors)
- Monitor: 14 inch, multi-sync, SVGA 1024 x 768 non-interlaced, 0.28 mm or less, Energy Star compliant
- Keyboard and mouse
- Disk: 1 GB IDE hard drive
- Ports: 1 parallel, 2 serial
- Network: 32 bit, PCI bus 10/100 MBPS Fast Ethernet controller card

#### *Higher performance*

- CPU: Pentium Pro 200MHz (with upgradeable motherboard)
- RAM: 32 MB RAM
- BUS: ISA and PCI (typically 3 32-bit PCI and 3 16-bit ISA)
- Graphics accelerator: PCI bus, SVGA 1024 x 768, 256 colors with 2MB RAM (4MB VRAM or WRAM for fast true color imaging at 1024 x 768 x 24 bit / 16.7 million colors)
- *Monitor: 17 inch*, multi-sync, SVGA 1024 x 768 *non-interlaced*, 0.28 mm or less, Energy Star compliant, 75 Hz or better refresh for reduced flicker
- Keyboard and mouse
- Disk: 1.6 GB-IDE hard drive (2GB for documentors or power users)
- Ports: 1 parallel, 2 serial
- Network: 32 bit, PCI bus 10/100 MBPS Fast Ethernet controller card

### *Optional*

- Optional communications: 28.8K V.34 modem.
- Optional multimedia: 16 bit sound card (Sound Blaster compatible) with speakers.
- Optional CD-ROM: 8X drive

### *Minimal footprint configuration.*

Some ward locations have severe physical space restrictions where a minimal footprint workstation configuration is *needed*. For these situations, small physical dimension system configurations should be considered. These systems should also meet the same performance *specifications* outlined above.

## **Laptop Requirements**

- 100MHz Pentiums, with 10MHz network cards
- 2MB video RAM
- 32 MB RAM
- 14" monitors set to 640x480

## **Software**

Current **recommended** workstation software configuration:

- Windows operating system: MS Windows 95, or Windows NT Workstation. All sites should migrate away from Windows 3.1 or Windows for Workgroups 3.11. Microsoft's TCP/IP, FTP, Telnet - bundled with Windows 95, NT Workstation, WFW 3.11
- 32 bit Application Support -bundled with Windows 95, NT Workstation. Win3.2 is free for WFW 3.11
- Broker Client Agent (if using multi-signon; otherwise, optional)
- Properly configured HOSTS file

### **Optional**

- Electronic mail: Microsoft Exchange Client
- World Wide Web browser
- Application software: such as Microsoft Office 95 or 97 (Microsoft Word, Excel, Power Point). The number, the type, and the implementation strategy of applications should be determined by the functional needs of the user(s).
- Windows development environment: Borland Delphi for Windows. Software Services selected Borland Delphi for Windows as the application development environment to be used by the CIO field Office development staff. The underlying architecture, which exchanges messages using the *VISTA* Request Broker, would permit local sites to use any compatible tool, such as Visual Basic or C++.
- Terminal emulator for Windows
- Presentation software: Microsoft Power Point
- Drawing software;
- Publishing software
- Computer-aided design and drafting (CADD).

#### **Under evaluation,**

- workstation management software: functions such as those contained in MS SMS Client.

## **Local Area Networks**

#### **Server hardware (non VISTA servers)**

For simplicity of support, facilities should consider purchasing the same type of hardware used for the VISTA servers. These systems would both run the recommended server NOS (network operating system) of Microsoft Windows NT. General features to be considered include:

- Single processor system with capacity to expand to multi-processor
- RAID magnetic disk drive configurations for critical applications
- Backup device
- Fast disk controller (SCSI-2)
- Uninterruptable power supply (UPS) with shutdown software
- Modems for RAS and system access by support personnel

#### **Server software**

- Microsoft Windows NT 3.5x or 4.x. Microsoft Windows NT has been selected as the recommended server NOS (network operating system) for non- VISTA applications within VHA
- Electronic mail: Microsoft Exchange Enterprise Version.
- VISTA Request Broker on VISTA servers
- CD ROM resources: Network versions of medical reference sources such as Physicians Data Reference
- Optional workstation management software, e.g. SMS

#### **LAN naming conventions**

LAN naming conventions are important as we maximize the benefit from our installed systems. The best trade-offs need to be made to ensure that the results are user friendly, compatible with evolving computer networking technology, and compatible with other VA organizations. Conventions are needed for objects such as user names, domains, servers, shared directories, post offices, printers, printer queues, groups, workstation computer names, login scripts, and shared resource names (FAX, modem pools, CD ROM towers). It is possible that these conventions will need to change over time. The VHA NT naming conventions documents can be found on the internal VA Intranet server under medical automation, at link *http://152.128.2.7/mediauto/domain7.doc*.

#### **LAN architecture**

The VHA Office of the Chief Information Officer (OCIO) has developed the VHA LAN Architecture for use as guidance in the implementation of a scaleable, open local area network (LAN) architecture at VHA facilities.

The key assumption underlying the design of the recommended architecture is reflected in the 1992 VHA report, DHCP Facility Data Communications Cabling Recommendations and Implementation Strategies (*http://vawww.va.gov/tss/datanetd/ttf1992.doc*). The network backbone is a fiber optic implementation and the horizontal wiring is realized using three four-

pair unshielded twisted pair (UTP) category 5 cables to the workspace. Three corresponding architectures were recommended in support of the three business cases.

The crux of the recommended VAMC architecture is LAN switching realized with Ethernet, FDDI, and ultimately, ATM technologies. The augmented recommended architecture includes an alternative architecture for VA facilities with conservative demands and limited economic resources.

**Facility wiring/cabling**

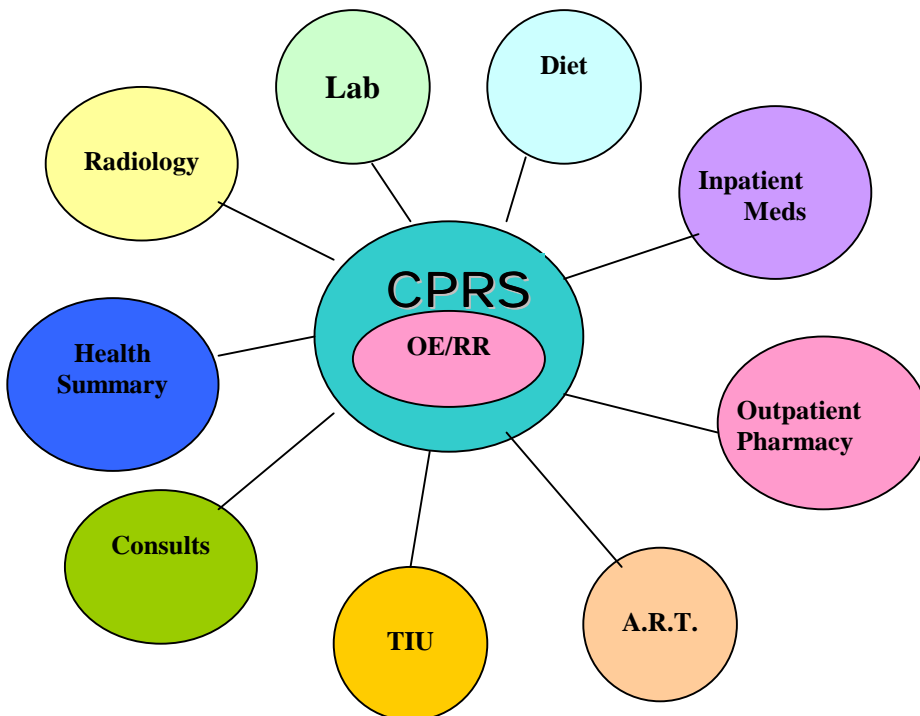
Facility wiring and cabling recommendations are outlined in the 1992 VHA report DHCP Facility Data Communications Cabling Recommendations and Implementation Strategies (<http://vaww.va.gov/tss/datanetd/tt£1992, doc>), released to the field in January 1992.

Facility-wide connectivity would include a multi-mode fiber optic backbone to all wiring locations, and category 5 unshielded twisted pair (UTP) wiring to all work/user locations. Such a cabling scheme is anticipated to support any future recommendation for a LAN architecture. The VII Telecommunications Infrastructure Project (TIP) is currently underway aimed at helping sites upgrade to the appropriate cabling and LAN architecture.

## IV. Set-Up for Other CPRS Packages

---

- A. Adverse Reaction Tracking
- B. Consult/Request Tracking
- C. Dietetics
- D. Health Summary
- E. Imaging
- F. Lab
- G. Pharmacy:
  - Pharmacy Data Management
  - Outpatient Pharmacy
  - Inpatient Medications
- IV
- Unit Dose
- H. Text Integration Utilities (TIU)



## Parameters for Packages Related to CPRS

The behavior of CPRS is affected by parameters controlled by the following options in ancillary packages that interface with CPRS:

### Imaging

- Common Procedure Enter/Edit
- Rad/NM Procedure Entry/Edit
- Modifier List
- Procedure Modifier Entry
- Division Parameter Set-up
- Location Parameter Set-up
- Device Specifications for Imaging Locations
- Location Parameter List
- Sharing Agreement/Contract Entry/Edit
- Active Procedure List (Long)
- Examination Status Entry/Edit
- Examination Status List
- Rad/NM Diagnostic Code Enter/Edit
- Diagnostic Code List

### Lab

- LR70 PAR DOMAIN      Domain Level Parameter Edit
- LR70 PAR LOC          Location Level Parameter Edit
- LR70 PAR PKG          Package Level Parameter Edit
- LR70 PARAM MENU      Update CPRS Parameters
- LR70 ORDER PARAMETERS Update CPRS with Lab order parameters
- LR70 SINGLE LAB TEST Update CPRS with Single Lab test
- LR70 ALL LAB TESTS    Update CPRS with all Lab test parameters
- LRACC MERG            Merge Accessions

### Pharmacy

#### Pharmacy Data Management Menu

- Pharmacy/VA Generic Orderable Item Report
- VA Generic Orderable Item Report
- Create Pharmacy Orderable Items
- Manually Match Dispense Drugs
- Orderable Item Matching Status
- Edit Orderable Items
- Dispense Drug/Orderable Item Maintenance
- Additive/Solutions, Orderable Item
- Orderable Item Report



Drug Enter/Edit  
Lookup into Dispense Drug File  
Med Route/Instructions Table Maintenance  
Med. Route/Instruction File Add/Edit  
Medication Instruction File Add/Edit  
Standard Schedule Edit  
Electrolyte File (IV)  
Enter/Edit Local Drug Interaction  
Edit Drug Interaction Severity  
Primary Drug Edit  
Edit IV Identifier  
CMOP Mark/Unmark (Single drug)  
Locked with PSXCMOPMGR

### **Outpatient Pharmacy**

The system parameter, ADMISSION CANCEL OF RXS, if set to yes will discontinue med orders 72 hours after admission. The option used to determine this parameter is called Site Parameter Enter/Edit [PSO SITE PARAMETERS].

When renewing OP orders through the front door, there's a function call that is used to help determine if OP orders can be renewed.

S X=\$\$RENEW^PSORENW(ORIFN). Returned X=-1,1 or 0\_"^"\_reason  
(-1=invalid order, 1=renewable, 0=not renewable).

### **Maintenance (Outpatient Pharmacy) Menu**

Site Parameter Enter/Edit  
Edit Provider  
Add New Providers  
Queue Background Jobs  
Autocancel Rx's on Admission  
Bingo Board Manager ...  
Edit Data for a Patient in the Clozapine Program  
Enter/Edit Clinic Sort Groups  
Initialize Rx Cost Statistics  
Edit Pharmacy Intervention  
Delete Intervention  
Auto-delete from Suspense  
Delete a Prescription  
Expire Prescriptions  
Purge Drug Cost Data  
Purge External Batches  
Recompile AMIS Data

## ***Parameters for Packages Related to CPRS, cont'd***

### **Inpatient Meds**

#### **Options**

*Auto-Discontinue Set-Up* (to auto-discontinue patients' orders whenever patients are transferred between wards, services, or to Authorized or Unauthorized Absence)

*Inpatient Ward Parameters Edit* (to edit MAR Parameters)

*Site Parameters (IV)*

#### **Files**

Inpatient Meds uses the following fields from the Pharmacy System file (^PS(59.7)):

**NON-FORMULARY MESSAGE:** This is a message that will be shown to non-pharmacists when they order patient drugs that are not currently stocked by the pharmacy. This is typically a warning and/or a procedure the non-pharmacist must follow before pharmacy will dispense the non-formulary drug.

**ALLOW THE CHANGE OF ORDER TYPES ON ORDERS FROM OERR:** This field is a site parameter that will allow the pharmacist to change the type of order from what is received from CPRS. If this field is set to yes, it will be possible to change the order type on orders where the Orderable Item has data in the CORRESPONDING IV ITEM field for unit dose orders or data in the CORRESPONDING UD ITEM for IV orders.

**IV IDENTIFIER:** This is a free-text field that can be up to 30 characters. If the Orderable Item is marked for IV usage, this text will display next to the Orderable Item to distinguish a Unit dose from an IV drug.

These fields can be accessed through the *Systems Parameters Edit* [PSJ SYS EDIT] option.

### **Text Integration Utilities (TIU) and Authorization/Subscription Utility (ASU)**

#### **TIU Maintenance Menu {TIU IRM MAINTENANCE MENU}**

- TIU Parameters Menu...[TIU SET-UP MENU]
  - Basic TIU Parameters [TIU BASIC PARAMETER EDIT]
  - Modify Upload Parameters [TIU UPLOAD PARAMETER EDIT]
  - Document Parameter Edit [TIU DOCUMENT PARAMETER EDIT]
- Document Definitions (Manager)...[TIUF DOCUMENT DEFINITION MGR]
  - Edit Document Definitions [TIUFH EDIT DDEFS MGR]
- Create Objects [TIUFJ CREATE OBJECTS MGR]
- User Class Management ...[USR CLASS MANAGEMENT MENU]
  - User Class Definition [USR CLASS DEFINITION]
  - Edit Business Rules [USR EDIT BUSINESS RULES]
  - Manage Business Rules [USR MANAGE BUSINESS RULES]

## **A. Adverse Reaction Tracking (ART)**

---

Adverse Reaction Tracking (ART) doesn't require any set-up for CPRS.

Patch GMRA\*4\*4 contains interface routines and fixes to the CPRS/ART interface. It needs to be installed before CPRS.

## B. Patient Movement

The Bed Control (Admission, Discharge, and Transfer) package doesn't require any special set-up or have any special options for setting parameters for CPRS. However, Bed Control options can be used by other packages to tie their various events to the MAS events. These package events are processed after the DGPM MOVEMENT EVENTS option has been completed.

### ■ Review and assign sequence numbers to protocols in the DGPM Movement Events field of the Protocol file.

All protocols in this ITEM field of the PROTOCOL file must be sequenced before the OR protocols.

Most of the necessary movement event protocols are automatically assigned during the CPRS installation. Make sure the following CPRS protocols are in the DGPM Movement Events field, in a sequence similar to the following:

ITEM:	DGOERR NOTE	SEQUENCE: 13 ( <i>this should have the lowest sequence #</i> )
ITEM:	FHWMAS	SEQUENCE: 14
ITEM:	LR70 MOVEMENT EVENT	SEQUENCE: 15
ITEM:	OCX ORDER CHECK PATIENT MOVE	SEQUENCE: 16
ITEM:	PSJ OR PAT ADT	SEQUENCE: 19
ITEM:	ORU AUTOLIST	SEQUENCE: 21
ITEM:	ORU REVIEW DELAYED ORDERS	SEQUENCE: 22
ITEM:	ORU PATIENT MOVMT	SEQUENCE: 100
ITEM:	OR GUA EVENT PROCESSOR NOTASK	SEQUENCE: 999 ( <i>this should have the highest sequence #</i> )

### Example: Entering a protocol sequence # for DGPM MOVEMENT EVENTS

This #  
should be  
less than  
all OR\*  
item  
sequences

```
Select OPTION: ENTER OR EDIT FILE ENTRIES
INPUT TO WHAT FILE: OPTION// 101 PROTOCOL      (3374 entries)
EDIT WHICH FIELD: ALL// ITEM
  EDIT WHICH ITEM SUB-FIELD: ALL// <Enter>
THEN EDIT FIELD: <Enter>
Select PROTOCOL NAME: DGPM MOVEMENT EVENTS      MOVEMENT EVENTS v 5.0
Select ITEM: DGOERR NOTE
  ITEM: DGOERR NOTE// <Enter>
  MNEMONIC: <Enter>
  SEQUENCE: 69// 13
  MODIFYING ACTION: ^
Select ITEM: <Enter>
```

## DGPM Movement Events

At the completion of a patient movement, the following events take place through this option:

1. The PTF record is updated when a patient is admitted, discharged, or transferred.
2. The appointment status for a patient is updated to “inpatient” for admissions and “outpatient” for discharges. Admissions to the domiciliary have an “outpatient” appointment status.
3. When a patient is admitted, dietetics creates a dietetic patient file entry and creates an admission diet order. When a patient is discharged, all active diet orders are discontinued. If a patient is absent or on pass, the diet orders are suspended.
4. Inpatient pharmacy cancels all active orders when a patient is admitted, discharged, or on unauthorized absence. A patient can’t be given Unit Dose meds unless s/he is admitted to a ward. The patient can receive IV meds, however. When a patient is transferred, an inpatient system parameter is used to determine whether or not the orders should be cancelled. When a patient goes on authorized absence, the inpatient system parameter is used to determine whether the orders should be cancelled, placed on hold, or no action taken. When a patient returns from authorized absence, any orders placed on hold will no longer be on hold.
5. Orders for a patient may be reviewed for further action by the user.
6. MAS notifications may be displayed to users defined in a CPRS list for that patient. These notifications are displayed for admissions, deaths, and discharges.

### **Protocols hooked to MAS Event Driver in File 101**

<u>Name</u>	<u>Type</u>
DGPM MOVEMENT EVENTS	X
DGPM TREATING SPECIALTY EVENT	X
SD APPT STATUS	X
DGJ INCOMPLETE EVENT	X
DGOERR NOTE	X
FHWMAS	X
PSJ OR PAT ADT	A
ORU PATIENT MOVEMENT	A

## C. Consult/Request Tracking

*See the Consult/Request Tracking V. 3.0 Technical Manual for complete details on implementing and maintaining the package.*

*See the TIU section in this manual for instructions on setting up the TIU/Consults/CPRS interface.*

### Patch GMRC\*2.5\*17

All sites running v2.5 of Consult/Request Tracking must install this patch prior to installing CPRS v1.0. This patch can be loaded anytime prior to the CPRS v1.0 installation at your site but it is recommended that you load it just prior to installing CPRS v1.0. If you create a new GMRCR protocol after installing this patch you must reinstall the patch. Installing the patch multiple times does not cause any problems. The CPRS v1.0 installation includes Consult/Request Tracking v3.0.

☞ **NOTE:** Since this patch was created after the CPRS v1.0 build, the environment checks for CPRS v1.0 and Consult/Request Tracking v3.0 do not check to see that this patch has been installed prior to the CPRS v1.0 install.

### Service and Specialty Hierarchy

If your site has set up a Service and Specialty hierarchy through version 2.5, this is converted with the installation of CPRS.

The Request Services file (#123.5) is distributed with a small selection of services. The hierarchical relationships are not in place upon distribution.

The small selection of services distributed with the package should not be deleted from the Request Services file (#123.5) under any circumstances. You may delete locally defined services and their associated hierarchies until the services are selected for ordering consults. Once the ordering process has begun **DO NOT DELETE** a service entry. Instead, disable the service using the SERVICE USAGE field in file 123.5. Disabled services are not selectable for ordering or tracking.

The Service/Specialty hierarchy you define can be as complex as needed to meet service requirements at your site. To get started you will probably want to specify a small subset of services/specialties and add to them over a period of time. ALL SERVICES needs to be the top entry in the hierarchy.

In order to build the service hierarchy, you will need to know how the service entry in the Request Services file (#123.5) will be used. Some services will be used as a GROUPER ONLY and other services may be used for TRACKING ONLY. The

SERVICE USAGE field is provided for you to differentiate the services in the hierarchy.

To see your site's hierarchy, use the *Consults Service Tracking* [GMRC SERVICE TRACKING] option and enter ?? at the "Select Service/Specialty:"

**NOTE** *For the Consults tab of CPRS to function properly, any new service added to the hierarchy must be made a sub-service of ALL SERVICES!!*

If the service is not directly placed under the ALL SERVICES heading, it must be a sub-service of a service that IS under ALL SERVICES. If a service is not in the hierarchy under the ALL SERVICES heading, users will not be able to view or respond to the consult from the consults tab in CPRS after it has been sent.

### Sample Hierarchy


```
ALL SERVICES
  REHAB MEDICINE (GROUPER)
    PHYSICAL MEDICINE & REHABILITATION
      OCCUPATIONAL THERAPY (TRACKER)
      KENESIOTHERAPY (TRACKER)
      PHYSICAL THERAPY (TRACKER)
  MEDICINE (GROUPER)
    CARDIOLOGY
    ALLERGY/IMMUNOLOGY
    GI INFECTIOUS DISEASE
```

Each hospital service or primary care team should work with the IRMS staff and its Clinical Coordinator to define its service and specialty hierarchy, who the users will be, and the types of consults that are orderable from its specialties. Service users may range from clerks to nurses, pharmacists, clinical technicians, physicians, and other types of clinicians.

Plan every detail of your site's consult hierarchy before ever trying to do the setup in production. It is critical not only to draw your entire hierarchy out on paper so that all tiers are perfectly clear, but also to speak with every service involved so that the correct users and hardware are identified at the time of the Setup. Doing this before the Consults Package is turned on in **VISTA** will save countless hours of frustration and misunderstanding later.

## Consults Install, Planning, and Implementation Checklist

This checklist can help you walk through the steps needed to implement the Consults package.

 **NOTE:** Important changes since Consults/Request Tracking Version 2.5 are emphasized with a note.

### INSTALL NOTES

- ☐ The Consult/Request Tracking V. 3.0 package installs automatically when CPRS V. 1.0 installed.

### PLANNING NOTES

 **NOTE:** Effective with Consults/Request Tracking V. 3.0:

1. A service is only selectable for update/tracking if it is defined as part of the All Services hierarchy.
2. Disabled services can be left in the All Services hierarchy so their order results can be returned, but are not selectable in the ordering process.
3. Tracking services must be in the All Services hierarchy in order to receive forwarded consults. The tracking service can only be selectable in the order forwarding process if the user is an update user for the tracking service or its parent service.

### Plan the Consult Service Hierarchy

- ☐ 1a. Identify services to receive consults.
- ☐ 1b. Determine if the service should be selectable in the ordering process from CPRS.

For some consults, the order may need to be sent to a Service control point for forwarding to a service that has been identified as a “Tracking Only” service. (Tracking Only services are not selectable during the initial CPRS order process.) If a service control point is desired, the tracking services should be sub-specialties under the control point service within the All Services hierarchy.

- ☐ 1c. Determine if there should be a service that will be used as a “Groupers Only” (e.g., Inpatient Services, Outpatient Services, and Outside Services might be good services to define as groupers).



## ***Consults Install, Planning, and Implementation Checklist, cont'd***

When a Grouper Only service is selected in the CPRS order process, the service hierarchy defined under the grouper service will be displayed for selection items. The Grouper Only cannot be selected to receive an order. The All Services service is a Grouper Only, provided to build the Consult Service hierarchy upon.

### **Plan Service Users and Notification Recipients**

- ☐ 2. Identify individuals at the receiving service who should be notified when a consult is being sent to the receiving service.
- ☐ 3. Identify service teams of clinicians or service users who should receive notifications.

Team definitions may be used in addition to (or in lieu of) naming individuals to receive notifications. The teams for each service may be broken down by hospital locations that the clinicians follow if desired.

- ☐ 4. Identify individuals at the receiving service who will NOT receive notifications about new consults, but should be able to perform update capabilities for this service.
- ☐ 5. Identify the service printers that will be used to automatically print Consult Form 513s when a consult order is received from CPRS.



**NOTE:** Effective with Consult/Request Tracking V. 3.0, all Consult Form 513 prints are done from Consult routines. OE/RR print templates are no longer used for consult prints.

### **Plan Specific Procedures or Requests for Service(s)**


- ☐ 6a. *Optional:* Identify direct request or procedure orders that specific consult services may receive, which do not require a Consult. (e.g., EKG: Portable)
- ☐ 6b. Plan questions/templates for ordering clinicians to be asked when the order is placed. This would become the text for the Reason for Request.
- ☐ 7. Identify the types of information the Receiving Services will need to see for their patients in a Health Summary report.

### *Consults Install, Planning, and Implementation Checklist, cont'd*


- ☐ 8. Identify Ordering Providers who should receive a notification when the Receiving Service has reached a resolution of *completed*, *denied*, or *discontinued* for a consult ordered by the provider.

#### **TIU Setup**

- ☐ 9. Plan your hospital's TIU hierarchy. See the *Text Integration Utility (TIU) Implementation Guide* for details on this step.
- ☐ 10. If you have not already done so, install TIU\*1\*4.
- ☐ 11. Run the TIU DEFINE CONSULTS option.

 **NOTE:** If you do not run the TIU DEFINE CONSULTS option, no status update takes place when the TIU note is entered.

- ☐ 12. Enter the rest of your planned TIU document hierarchy using the Manager Document Definition Menu.
- ☐ 13. Define consult document parameters using the *Document Parameter Edit* option.

 **NOTE:** We strongly recommend entering Yes to ALLOW >1 RECORDS PER VISIT.

### **IMPLEMENTATION AND MAINTENANCE (Abbreviated guidelines)**

- ☐ 1. Add the GMRC MGR option menu to the ORMGR option menu, with a mnemonic of CS.
- ☐ 2. Add the ORLP TEAM MENU option to GMRC MGR option menu, with a mnemonic of TE.
- ☐ 3. Add the ORB NOT MENU option to the GMRC MGR option menu, with a mnemonic of NO.
- ☐ 4. Add the GMRC GENERAL SERVICE USER, GMRC MEDICINE USER, or the GMRC PHARMACY USER menu to the menus of Consults users who need more functionality than the CPRS consults tab provides.

*Consults Install, Planning, and Implementation Checklist, cont'd*

- ☐ 5. (optional) Set up a team for each consult service. Use the *Team Mgmt Menu* option, ORLP TEAM MENU.
- ☐ 6. Turn on the NEW SERVICE CONSULT/REQUEST notification for each of the individuals who were identified to receive notifications. Use the *Enable/Disable Notifications* option of the NOTIFICATION MGMT MENU, ORB NOT MGR MENU.



**NOTE:** Unless Consult notifications are set to mandatory, individual users must use the *Enable/Disable My Notifications* option of the Notifications Management Menu to individually enable the notifications they want to receive.

- ☐ 7. Turn on the CONSULT/REQUEST RESOLUTION notification for all the ordering provider users identified to receive this notification, or train them to do it themselves. Use the *Enable/Disable Notifications* option of the NOTIFICATION MGMT MENU, ORB NOT MGR MENU.
- ☐ 8. Turn on the CONSULT/REQUEST CANCEL/HOLD notification for all the ordering providers identified to receive this notification, or train them to do it themselves. Use the *Enable/Disable Notifications* option of the NOTIFICATION MGMT MENU, ORB NOT MGR MENU.
- ☐ 9. Define the Service hierarchy in the Request Services File (#123.5) with the associated users and service printer. Use the *Set up Consult Services* option, GMRC SETUP REQUEST SERVICES.
- ☐ 10. Add the *Set up Service Users* [GMRC SETUP SERVICE USERS] option to the users who are allowed to manage service users.
- ☐ 11. Add the following two options to Service update users' primary or secondary menu option: *Consult Tracking* [GMRC SERVICE TRACKING] and *Service Consults Pending Resolution* [GMRC RPT PENDING CONSULTS].
- ☐ 12a. (*Optional*. With V. 3.0, services do not need to be protocols to be included on the Add New Orders screen. Adding the service to the hierarchy makes it a valid orderable item.) Create Protocol entries in the PROTOCOL File for each Service that should appear on the Add New Orders Screens.

### *Consults Install, Planning, and Implementation Checklist, cont'd*

- ☐ 12b. Use the *Set up Consult Protocols* [GMRC SETUP PROTOCOLS] option to define these services as “Consult Types.” These Protocol entries will be created with a name prefix of “GMRCT.”
- ☐ 13a. (Optional) If direct request items were identified related to a RECEIVING SERVICE, create Protocol entries in the PROTOCOL File for each Direct Request Item which should appear on an Add New Orders Screen. Use the *Set up Consult Protocols* [GMRC SETUP PROTOCOLS] option to define these direct request items as “Procedure Requests.” These Protocol entries will be created with a name prefix of “GMRCT.”
- ☐ 13b. Add the “PROCEDURES...,” GMRCOR REQUEST protocol item to the OR GMENU OTHER ORDERS protocol menu. Use the *Protocol Menu Edit* [ORCL PROTOCOL MENU EDIT] option.
- ☐ 14. If using a site-defined Form 513: Transfer Consult Form print formats (defined in File 100.23) needing changes to a local print format and make the changes needed. Then alter the Order Parameters file (#100.99) Service Copy Header, Footer, or Body for the Consult Tracking Package.
- ☐ 15. Turn on the Package Site Parameter “ON:” field for the Consult Tracking Package in the ORDER PARAMETERS FILE (#100.99).
- ☐ 16a. Define Health Summary Types that the receiving services need.
- ☐ 16b. Provide Health Summary options to appropriate service users and inform them of the Health Summary Type defined for their use.

### **Multi-Site**

- ☐ Use the *Set up Consult Site Parameters* (PA) on the Consult Management menu to add multi-site or multi-division information to the Request Services list.

## **D. Dietetics**

Dietetics Patch 6 is installed with CPRS, but it doesn't require any set-up for CPRS.

## E. Health Summary

### **New Health Summary parameter and option**

*GUI Health Summary Types* [ORW HEALTH SUMMARY TYPES]

This option allows you to set up a list of health summary types to be displayed on the GUI Reports tab. Don't add health summaries that require additional prompting (e.g., for date ranges & occurrence limits) since the GUI cannot support this type of prompting.

### **Patch GMTS\*2.7\*12**

This patch contains a new Health Summary component, *Selected Progress Notes*, which allows selection of specific Progress Notes Titles for display on Health Summaries. The Progress Notes, Discharge Summary, and CWAD components now extract data from TIU, rather than Progress Notes (GMRP) or Discharge Summary (GMRD). Care has been taken to assure that the formatting and content of the components have remained the same, except that the signature block information will now reflect the author's (and cosigner's) name and title at the time of signature, rather than displaying their current values at the time of output.

### **Patch GMTS\*2.7\*14**

The purpose of Health Summary Patch 14 is to update the Radiology/Nuclear Medicine Health Summary to reflect Exam Sets on the Radiology Profile and Radiology Impression components. Diagnostic codes have been added to the profile, and the wording of labels, descriptions, and default header names has been changed from Radiology to Imaging to reflect the inclusion of Nuclear Medicine and other imaging types in the health summary data.

After the installation of this patch, Health Summary ADPACs should check the headers on Health Summary Types created prior to the installation of GMTS\*2.7\*14. Headers created prior to GMTS\*2.7\*14 can be edited through the *Create/Modify Health Summary Type* option. Health Summary ADPACs should review the components displayed when using the *Ad Hoc Health Summary* option. If header changes are needed, edit the header by using the *Edit Ad Hoc Health Summary Type* option.

GMTS\*2.7\*14 updates the default header names of the following entries in the Health Summary Component file #142.1: RADIOLOGY IMPRESSION, RADIOLOGY IMPRESSION SELECTED, RADIOLOGY PROFILE, and RADIOLOGY STATUS. (This will take effect in health summary types created after this patch is installed—new health summary types will contain the new default headers.)

### **Patch GMTS\*2.7\*15**

This patch updates the Current Orders, IV Pharmacy, Outpatient Pharmacy, and Unit Dose Pharmacy components, to make them compatible with new the file design in CPRS.

## F. Laboratory

Both the Lab package and the CPRS package contain site parameters for the CPRS-Lab interface. Previous options on the Lab Liaison Menu still operate to set parameters for CPRS. Lab patch LR\*5.2\*121 introduces new parameters options.

### Lab Site parameters set within CPRS

#### Edit Site Local Terms

After CPRS installation, each site must run this option to link terms used in the expert system to local terms. Terms like Serum Creatinine must be mapped to the lab test file.

#### Edit Site Local Terms Example

```
Select OPTION NAME: OCX MAIN          Order Check Expert System Main Menu

1      Compile Rules
2      Expert System Rule Activate/Inactivate
3      Edit Site Local Terms
4      Expert System Inquire

Select Order Check Expert System Main Menu Option: 3  Edit Site Local
Terms

Order Check National Terms
SERUM CREATININE
SERUM UREA NITROGEN
DNR
PROTHROMBIN TIME
THROMBOPLASTIN TIME PARTIAL
NPO
SERUM SPECIMEN
PARTIAL THROMBOPLASTIN TIME
ANGIOGRAM (PERIPHERAL)
WBC

    < Enter ?? to see the rest of the national terms on this list>

Select National Term: PROTHROMBIN TIME

National Term: PROTHROMBIN TIME

Translated from file: 'LABORATORY TEST'  60

PT      (467)

Select LABORATORY TEST NAME: PT
467. PT
Select LABORATORY TEST name: <Enter>
```

## Lab Interface, cont'd

- **Inpt Lab Order/Result Search Range**

This option on the GUI Cover Sheet Display Parameter menu on the CPRS Parameters menu sets the range of dates for lab orders and results to be displayed on the Cover Sheet. This option allows you to modify the *system's* default number of days to display on the cover sheet for Inpatient Lab Orders and Results, Outpatient Lab Orders and Results, Radiology Exams, Consult/Requests, Appt Start Dates, Appt Stop Dates, Visit Start Dates, Visit Stop Dates, and Clinical Reminders.

All of the options on this menu are very similar to this example.

```
Select CPRS Parameters Option: se GUI Cover Sheet Display Parameters

  SY      GUI Cover Sheet System Display Parameters
  DI      GUI Cover Sheet Division Display Parameters
  SE      GUI Cover Sheet Service Display Parameters
  LO      GUI Cover Sheet Location Display Parameters
  US      GUI Cover Sheet User Display Parameters

Select GUI Cover Sheet Display Parameters Option: SY GUI Cover Sheet System
Display Parameters

GUI Cover Sheet - System for System: OEX.ISC-SLC.VA.GOV
-----
Lab Order/Result Inpatient Search Range
Lab Order/Result Outpatient Search Range
Radiology Exam Search Range                60
Consult/Request Search Range
Appt Search Start Date
Appt Search Stop Date
Visit Search Start Date
Visit Search Stop Date
Clinical Reminders for Search
-----
Inpatient Lab Number of Search Days: 60
Outpatient Lab Number of Search Days: 365
Radiology Exam Number of Search Days: 60// <Enter>
Consult/Request Number of Search Days: 120

For Appt Search Start Date -
Select Clinic: <Enter>

For Appt Search Stop Date -
Select Clinic: <Enter>

For Visit Search Start Date -
Select Hospital Location: <Enter>

For Visit Search Stop Date -
Select Hospital Location: <Enter>

For Clinclal Reminders for Search -
Select Number: <Enter>
```



## *Lab Interface, cont'd*

### **Lab Site parameters set within Lab**

- Some lab tests are not meant to be resultated. This is indicated in the Lab test file (#60) and the Orderable Items file (#101.43). In both files there is a field called TYPE. The field in both files is a set of codes which indicates if the lab test is to be resultated or not. The codes consist of I:Input, O:Output, B:Both and N:Neither. If the TYPE for a lab test in the Lab file or Orderable Item file is set to "I" or "N," results will not be sent by lab. This may sometimes be set incorrectly and should be looked at when troubleshooting lab results-related notifications/alerts such as Lab Results, Abnormal Lab Results, Critical Lab Results, and STAT Results Available. If a lab results-related notification is not firing for a particular lab test, check the TYPE field for that test in the Lab Test and Orderable Items files. If it is "I" or "N" in either file, the results will not be posted via HL7 and the alert will not be sent.
- ***Edit Hospital Site parameters***  
This option (on the OE/RR Interface Parameters menu on the Lab Liaison menu) sets the parameters used in the Lab – CPRS interface, by location, to define the maximum number of days for continuous lab orders, whether or not to ask for an urgency, and the default type of collection.

### **Edit Hospital Site parameters example**

```
Select OE/RR Interface parameters Option:  EH  Edit HOSPITAL SITE parameters

Select LABORATORY SITE SITE NAME:  HOSPITAL
Select HOSPITAL SITE:  ?
Enter hospital location you wish to establish parameters for.
MAX DAYS FOR CONTINUOUS ORDERS://  ??
This is the maximum number of days that multiple-continuous orders can be
placed for this location.
CANCEL ON WARD TRANSFER:  ??
CANCEL ON SERVICE TRANSFER:  ??
ASK URGENCY:  //  ??
  Answer yes to this field to prompt for urgency for every test when ordering
  through OE/RR.  Tests with a forced urgency, as defined in the LABORATORY
  TEST file, override this parameter.
DEFAULT TYPE OF COLLECTION:  ??
Enter the default type of collection for blood draws that this location uses
the majority of the time. If one is not defined the default will be based
upon the following:
  Inpatient Locations: Lab Collect (LC)
  All other locations: Send Patient (SP)
```


## Lab Interface, cont'd

- **Edit Lab Administration Schedule**

Use the *Inquire to lab administration schedule* option (on the OE/RR Interface Parameters menu on the Lab Liaison menu) to view schedules, and *Edit a lab administration schedule* option to make changes or to add new schedules.

```
Select OE/RR interface parameters Option:  AS  Edit a lab administration
schedule

Select ADMINISTRATION SCHEDULE:  QAM
NAME:  QAM//  <Enter>
TYPE OF SCHEDULE:  ??
The type of schedule determines how the schedule will be processed.
STANDARD ADMINISTRATION TIMES:  ??
The times of the day for this schedule that the action should take place.
Use military time (24 hour clock) when entering the times.
FREQUENCY (IN MINUTES):  //  ??
The number of minutes between each time that the action should take place.
Select HOSPITAL LOCATION:  ??
Enter a hospital location for which a specific set of times or shifts
pertain.
Select ADMINISTRATION SCHEDULE:??
This is a set of administration times for this schedule specific to this
hospital.
```

 **NOTE:** Lab administration schedules are fully functional as exported. If sites choose to use the lab administration schedules as they are exported, all hospital location sites will have the same administration schedule. Many sites set CPRS up through a phased implementation, activating hospital locations as users become proficient with the software. Edit the administration schedules to create schedules for specific hospital locations.

## Lab Patch LR\*5.2\*121

This patch helps prepare sites for the release of OE/RR 3.0. All of the changes in this patch are compatible with OE/RR 2.5. This patch includes new routines, Data Dictionary changes, and new Options and Protocols. The majority of the changes introduced with this patch will not take effect until CPRS/OE/RR 3.0 is installed.

Associated patches that must be installed BEFORE LR\*5.2\*121:

- LR\*5.2\*100
- LR\*5.2\*127
- LR\*5.2\*171

## Lab Interface, cont'd

This patch requires the installation of patch LR\*5.2\*127, which has some new utilities to facilitate the linking of Laboratory Tests to the National VA Lab Codes found in file 64. This linking process needs to be done before the installation of OE/RR version 3 and should be done by Laboratory personnel familiar with all Laboratory Procedures, perhaps the Laboratory Information Manager.

This patch also includes some programmer APIs for retrieving lab results, by patient, in structured arrays and also in formatted arrays. These APIs are currently being used by OE/RR 3.0, Imaging, TIU and some HOST initiatives. These APIs will be documented as Supported References on FORUM as Integration Agreements.

### Implementation

Inform Lab users that canceled tests are no longer removed from the Lab files. The tests are marked as canceled and a record of the cancellation is maintained and displayed on the various lab status displays.

The Clinical Coordinator and the Lab Coordinator need to decide if/when to implement the automatic cancellation of lab orders when a patient movement occurs. To set up this functionality, the Laboratory Site file requires changes to three fields, and the Protocol file requires addition of a new item to the DGPM Movement Events protocol.

1. Go into VA Fileman and select *Enter or Edit File Entries*.  
Select the Laboratory Site file.

```
Select OPTION: ENTER OR EDIT FILE ENTRIES
INPUT TO WHAT FILE: LABORATORY SITE
EDIT WHICH FIELD: ALL// 150.3 CANCEL ON ADMIT
THEN EDIT FIELD: 150.4 CANCEL ON DISCHARGE
THEN EDIT FIELD: 150.5 CANCEL ON SPECIALTY TRANSFER
THEN EDIT FIELD: <Enter>

Select LABORATORY SITE SITE NAME: HOSPITAL
CANCEL ON ADMIT: YES// ??
    This field allows the automatic cancellation of pending/uncollected
    lab orders when a patient is admitted. If this field is set to YES,
    the orders will be cancelled in the lab files and the OE/RR files.
    Choose from:
        0          NO
        1          YES
CANCEL ON ADMIT: YES// <Enter>
CANCEL ON DISCHARGE: YES// ??
    This field allows the automatic cancellation of pending/uncollected
    lab orders when a patient is discharged. If this field is set to YES,
    the orders will be cancelled in the lab files and the OE/RR files.
    Choose from:
        0          NO
```

## Lab Interface, cont'd

```
1          YES
CANCEL ON DISCHARGE: YES// <Enter>
CANCEL ON SPECIALTY TRANSFER: YES// ??
    This field will enable cancellation of pending/uncollected lab orders
    when a patient's treating specialty changes.
    Choose from:
        0          NO
        1          YES
CANCEL ON SPECIALTY TRANSFER: YES// <Enter>
Select LABORATORY SITE SITE NAME: <Enter>
```

2. Go into VA Fileman again and select *Enter or Edit File Entries*. This time select the Protocol file.

```
Select OPTION: ENTER OR EDIT FILE ENTRIES
INPUT TO WHAT FILE: OPTION// 101  PROTOCOL      (3374 entries)
EDIT WHICH FIELD: ALL// ITEM
    1  ITEM      (multiple)
    2  ITEM TEXT
CHOOSE 1-2: 1
    EDIT WHICH ITEM SUB-FIELD: ALL// <Enter>
THEN EDIT FIELD: <Enter>

Select PROTOCOL NAME: DGPM MOVEMENT EVENTS      MOVEMENT EVENTS v 5.0
Select ITEM: LR70 MOVEMENT EVENT// ?
    Answer with ITEM
    Do you want the entire 22-Entry ITEM List? Y  (Yes)
    Choose from:
        ORU PATIENT MOVMT
        DGPM TREATING SPECIALTY EVENT
        SD APPT STATUS
        FHWMAS
        PSJ OR PAT ADT
        DGJ INCOMPLETE EVENT
        DGOERR NOTE
        GMRADGPM MARK CHART
        ORU AUTOLIST
        DG MEANS TEST DOM
        IB CATEGORY C BILLING
        VAFED EDR INPATIENT CAPTURE
        YS PATIENT MOVEMENT
        SC PCMM INPATIENT ACTIVITY
        SC ASSIGN PC TEAM ON DISCHARGE
        OCX ORDER CHECK PATIENT MOVE.
        OR GUA EVENT PROCESSOR NOTASK
        VSIT PATIENT STATUS
        LR70 MOVEMENT EVENT
    You may enter a new ITEM, if you wish
        Enter a protocol. A protocol that is an ancestor may not also be a
        sub-item.
    Answer with PROTOCOL NAME, or ITEM TEXT, or SYNONYM, or ACCESS, or
    SET MEMBERSHIP
    Do you want the entire 3374-Entry PROTOCOL List?
    Select ITEM: LR70 MOVEMENT EVENT// LR70 MOVEMENT EVENT <==Add this as a new
    item
        ITEM: LR70 MOVEMENT EVENT// <Enter>
        MNEMONIC: <Enter>
        SEQUENCE: 69// [This # should be less than all OR* item sequences]
        MODIFYING ACTION: ^
    Select ITEM: <Enter>
    Select PROTOCOL NAME: <Enter>
```

## Lab Interface, cont'd

### Blood Bank Evaluations

Since this patch contains a Blood Bank namespaced routine, the following evaluations are necessary to be in compliance with FDA requirements.

THE CHANGE IN THE LRBLPE ROUTINE WAS CLEARED FOR INSTALLATION IN PRODUCTION ENVIRONMENT BY FDA OFFICE OF COMPLIANCE, CENTER FOR BIOLOGICS EVALUATION AND RESEARCH, ON 5-30-97.

**PROBLEM:** It is necessary to modify the Blood Bank software to create an HL7 message to update CPRS when a Blood Bank order is processed. This is so that no functionality is lost when CPRS 1.0 is installed at the sites, which will be dependent upon HL7 messages rather than direct global reads to display information to the user.

**RISK ANALYSIS:** Changes made are totally transparent to the user and have no effect on blood bank software functionality, therefore the risk is NONE.

**EFFECT ON BLOOD BANK FUNCTIONAL REQUIREMENTS:** Problems do not involve any software design safeguards for safety critical elements.

**POTENTIAL IMPACT ON SITES:** Changes in this patch specific to the blood bank routine modified should have no impact on sites installing this patch.

**VALIDATION REQUIREMENTS BY OPTION:** Because of the nature of the changes made, no specific validation requirements exist as a result of installation of this patch.

### New Lab Options

LR70 PAR DOMAIN	Domain Level Parameter Edit
LR70 PAR LOC	Location Level Parameter Edit
LR70 PAR PKG	Package Level Parameter Edit
LR70 PARAM MENU	Update CPRS Parameters
LR70 ORDER PARAMETERS	Update CPRS with Lab order parameters
LR70 SINGLE LAB TEST	Update CPRS with Single Lab test
LR70 ALL LAB TESTS	Update CPRS with all Lab test parameters
LRACC MERG	Merge Accessions

With the exception of LRACC MERG, these options are not used until OE/RR 3.0 is installed.

## Lab Interface, cont'd

LRACC MERG is installed on the Lab Accessioning menu (LR IN). It is used to merge 2 accessions in one step. Before this option was created, it was necessary to delete tests from an accession and then add them back onto the appropriate accession. This had the effect of DCing an order and Adding an order in OE/RR. The Merge option now maintains all the links to the original Doctor's order without DCing and adding new entries. See the option description for more information.

### New Protocols

LR7O AP EVSEND OR	ANATOMIC PATH => OE/RR ORDER MESSAGE
LR7O BB EVSEND OR	BLOOD BANK => OE/RR ORDER MESSAGE
LR7O CH EVSEND OR	LAB => OE/RR ORDER MESSAGE EVENT
LR7O ALL EVSEND RESULTS	LAB RESULTS => EXTERNAL PACKAGE

These new Protocols create HL7 messages to be used by applications that want to receive orders, status updates, and completed lab results from the Lab package. When OE/RR 3.0 is released, it will connect to the EVSEND protocols to pick up the HL7 messages and create new orders.

If a package is only interested in messages that contain verified lab results, then the protocol LR7O ALL EVSEND RESULTS should be used to eliminate the need to look for result-only type messages (Control code=RE).

## Tricks & Tips

1. Code to screen out the printing of LC Lab collect type orders on the service device:

```
File: OE/RR Print FORMAT
Name: LAB REQUISITION
Screen: I $G(ORIFN),$$VALUE^ORCSAVE2(ORIFN,"COLLECT")'="lc"
```

### 2. *Setting Up ASK URGENCY*

ASK URGENCY: There are three different ways that this parameter will manifest itself. Other parameters that play a part in the decision tree are the DEFAULT URGENCY field in 69.9, which is a hospital-wide parameter and the FORCED URGENCY and HIGHEST URGENCY ALLOWED fields in File 60 (LABORATORY TEST File).

#### **This is how it works**

- If ASK URGENCY = YES, DEFAULT URGENCY = ROUTINE and FORCED URGENCY = NULL, the user will be prompted for an urgency with a default of ROUTINE,
- If ASK URGENCY = NO, DEFAULT URGENCY = ROUTINE and FORCED URGENCY = NULL, the user will not be prompted for an urgency and the default will be ROUTINE,
- If ASK URGENCY = YES, DEFAULT URGENCY ROUTINE and FORCED URGENCY = STAT, the user will not be prompted for an urgency and the default will be STAT,

The HIGHEST URGENCY field in File 60 is overridden by FORCED URGENCY and if ASK URGENCY is set to NO, then the test will be given the DEFAULT URGENCY even if it is higher than the HIGHEST URGENCY ALLOWED.

- ✎ **IMPORTANT POINT:** The DEFAULT URGENCY field in File 6.9S is a required field and will normally be set to ROUTINE. Remember that the ASK URGENCY prompt is defined by location. If you are ordering for a location that has not been entered into the HOSPITAL SITE multiple in File 69.9, the urgency will not be asked and the DEFAULT URGENCY will be used unless a FORCED URGENCY is defined.

## G. Pharmacy Packages

The Pharmacy packages relevant to CPRS are:

- Pharmacy Data Management (PDM) V. 1.0 (released prior to CPRS)
- Outpatient Pharmacy V. 7.0
- Inpatient Medications V. 5.0

IV

Unit Dose

Summaries of the set-up procedures for these packages are included on the following pages.

*See the Pharmacy Technical Manuals for COMPLETE details on implementing and maintaining these packages.*

### G-1. Pharmacy Data Management (PDM)

#### PHARMACY ORDERABLE ITEM file

When medication orders are entered through CPRS, the name and dose form of the medication to be administered will be selected from the PHARMACY ORDERABLE ITEM file (#50.7). After the drug and dose form have been identified, the user will have the option of selecting from the list of the dispense drug(s). To provide this functionality, a new file was created by pharmacy to create the list of Orderable items available through CPRS. This new PHARMACY ORDERABLE ITEM file (#50.7) is similar to the current PRIMARY DRUG file (#50.3), but also includes a dose form field that will always be displayed along with the drug name.

The Pharmacy Orderable Item name can be printed on Inpatient reports, profiles, MAR labels etc., in place of the Primary Drug Name. The Pharmacy Orderable Item name will also print on Outpatient reports and profiles, along with the Dispense drug name. The only time this is not the case is when finishing an order entered through CPRS in which a Dispense drug was not chosen. A more detailed explanation is included in the Inpatient Medications V. 5.0 and Outpatient Pharmacy V. 7.0 documentation. PDM contains the options necessary to create and populate the new PHARMACY ORDERABLE ITEM file (#50.7).

The following page contains the options exported with this package used to complete all of the Pharmacy tasks required for the installation of Outpatient Pharmacy V. 7.0 and Inpatient Medications V. 5.0.



## Pharmacy Data Management Menu

- \* Primary/VA Generic Orderable Item Report
- \* VA Generic Orderable Item Report
- \* Create Pharmacy Orderable Items
- \* Manually Match Dispense Drugs
- \* Orderable Item Matching Status
- Edit Orderable Items
- Dispense Drug/Orderable Item Maintenance
- Additive/Solutions, Orderable Items
- Orderable Item Report
- Drug Enter/Edit
- Lookup into Dispense Drug File
- Med. Route/Instructions Table Maintenance
- Medication Instruction File Add/Edit
- Standard Schedule Edit
- ELeCtrolyte File (IV)
- Enter/Edit Local Drug Interaction
- Edit Drug Interaction Severity
- Primary Drug Edit
- Edit IV Identifier
- CMOP Mark/Unmark (Single drug)
- Locked with PSXCMOPMGR
  
- Information
- Creating A Sig Using Information From CPRS Order Entry

\* These items are for pre-release only and will be deleted with the installation of Outpatient Version 7.0.

## G-2. Outpatient Pharmacy Setup

*See the Outpatient Pharmacy V. 7.0 Technical Manual for complete details on implementing and maintaining the package and the User Manual for an explanation of these options.*

### Maintenance (Outpatient Pharmacy) [PSO MAINTENANCE]

- Site Parameter Enter/Edit
- Edit Provider
- Add New Providers
- Queue Background Jobs
- Autocancel Rx's on Admission
- Bingo Board Manager ...
- Edit Data for a Patient in the Clozapine Program
- Enter/Edit Clinic Sort Groups
- Initialize Rx Cost Statistics
- Edit Pharmacy Intervention
- Delete Intervention
- Auto-delete from Suspense
- Delete a Prescription
- Expire Prescriptions
- Purge Drug Cost Data
- Purge External Batches
- Recompile AMIS Data

## Outpatient Pharmacy Keys

Key	Assignment
PSORPH	All pharmacists, the package coordinator, and all appropriate members of the ADP/IRM staff.
PSOA PURGE	The package coordinator and/or any person who will be responsible for archiving prescriptions.
PSOLOCKCLOZ	This key is used to override the lockouts in the Clozapine option. All members of the Clozapine treatment team must be entered as users on your system and must be given this key. All pharmacists who have the ability to override the lockouts in this option must also hold this key. These pharmacists should be identified by the Pharmacy Service representative of the Clozapine treatment team.
PSOINTERFACE	Users of the <i>External Interface Menu</i> .

## Archiving Device Setup

The following are examples for the archive device setup for file and tape. These examples may differ from site to site. If your device differs, check with your IRM service for information on setting up your device.

### HOST FILE SERVER (HFS) DEVICE SETUP:

```
NAME: HFS                                $I: ARC0797.TMP
ASK DEVICE: YES          ASK PARAMETERS: NO
VOLUME SET(CPU): VAA          QUEUING: ALLOWED
LOCATION OF TERMINAL: COMPUTER AREA  ASK HOST FILE: YES
ASK HFS I/O OPERATION: YES        *MARGIN WIDTH: 132
*FORM FEED: #                    *PAGE LENGTH: 64
*BACK SPACE: $C(8)              SUBTYPE: P-OTHER
TYPE: HOST FILE SERVER
BAUD RATE (c): UNKNOWN
```

### MAGNETIC TAPE DEVICE SETUP:

```
NAME: TAPE (T7867)                $I: $3$MKA600:
ASK DEVICE: YES                    ASK PARAMETERS: YES
SIGN-ON/SYSTEM DEVICE: NO
LOCATION OF TERMINAL: COMPUTER ROOM
*MARGIN WIDTH: 255                 *FORM FEED: #
*PAGE LENGTH: 256                 *BACK SPACE: $C(8)
OPEN PARAMETERS: (FORMAT="VAL4":BLOCKSIZE=2048)
SUBTYPE: MAGTAPE                  TYPE: MAGTAPE
PERFORM DEVICE CHECKING: NO
BAUD RATE (c): UNKNOWN
```

## ***Outpatient Pharmacy, cont'd***

### **Bingo Board Device Setup**

You must set up a dedicated device to be used for the bingo board. See the VAX DSM Systems Guide V. 2.0 for information on setting up the bingo board device. Only devices with the sub-type C-VT will be allowed to be entered at the DISPLAY DEVICE prompt in the *Enter/Edit Display* option found on the *Bingo Board Manager* menu. Once a dedicated device is setup, the bingo board can be scheduled to automatically start and/or stop at user-defined times.

### ***MUMPS Audiofax (Telephone Refill Requests)***

If you are using MUMPS Audiofax to process telephone refill requests, a new VEXRX routine must be installed to interface with Outpatient Pharmacy V. 7.0. To install this routine, go to SHOP ALL on FORUM and in the TELEPHONE REFILL REQUESTS Basket, retrieve the message "VEXRX for Outpatient V. 7." This message will contain the new VEXRX routine. This routine must be forwarded and installed on your production account.



**Important :** You cannot process telephone refill requests (MUMPS Audiofax) without the new VEXRX routine.

## **G-3. Inpatient Medications**

*See the Inpatient Medications V. 5.0 Technical Manual for complete details on implementing and maintaining the package.*

### **Inpatient Medications Conversion**

#### **Order Conversion**

For version 5.0, the PRIMARY DRUG is replaced by ORDERABLE ITEM. Conversions are included with this version that copy data in the old DOSAGE ORDERED field (#102) to the new DOSAGE ORDERED field (#109), and determines and adds an ORDERABLE ITEM (#108) to each order. Only orders that have a stop date less than 365 days prior to the 5.0 installation date will be converted. The installation date used by both methods described below is determined by the DATE KIDS BUILD LAST RUN field (#20.2) in the PHARMACY SYSTEM file (#59.7).

## ***Inpatient Medications, cont'd***

Order Location Codes will be standardized to **V** for the IV subfile of PHARMACY PATIENT file (#55), **U** for the Unit Dose subfile of PHARMACY PATIENT file (#55), and **P** for Orders in NON-VERIFIED ORDERS file (#53.1). On orders in the IV subfile of 55, a new field was added to the ACTIVITY LOG multiple which is a pointer to NEW PERSON file (#200). This field ENTRY BY (#6) is populated by taking the free text data from the ENTRY CODE field (#.23) and determining the corresponding INTERNAL ENTRY NUMBER (IEN) in File 200. If the determination can not be made a mail message is sent to holders of the PSJI MGR key with these identified.

Two methods are used to perform this conversion:

### **Background**

When version 5.0 is installed, a process is queued to run in the background and convert existing Inpatient Medications orders. After a patient's orders have been processed, that patient's IEN will be stored in the LAST PATIENT CONVERTED TO 5.0 field (#25.1) of the PHARMACY SYSTEM file (#59.7). This will be used to determine where the process should begin if it must be restarted. When all of the orders for a patient have been processed, the CONVERTED FOR VERSION 5.0? field (#104) of the PHARMACY PATIENT file (#55) is set, showing the conversion has been accomplished for that patient. When all Inpatient Medications orders within the specified time frame on the system have been converted, the date/time the process completed will be stored in the DATE 5.0 CONVERSION COMPLETED field (#25.2) of the PHARMACY SYSTEM file (#59.7).

### **Patient Selection**

Hooks have been added to convert the data "on the fly", if an order is accessed before the background conversion completes and before the selected patient's data has been converted by the background process. After converting the orders for the selected patient, the CONVERTED FOR VERSION 5.0? field (#104) of the PHARMACY PATIENT file (#55) is set, showing the conversion has been accomplished for that patient.

### **Pick List Conversion**

A new field , ORDERABLE ITEM, is added to the Pick List file (#53.5). This field (#.06) of the ORDER multiple is populated as part of this conversion and the cross-references are recompiled so that the pick lists are ready for use with Version 5.0

## ***Inpatient Medications, cont'd***

### **Order Set Conversion**

The dispense drug is used to determine Orderable Item which replaces Primary Drug. Once this conversion occurs the Order Sets are ready for use with Version 5.0. If any order within an order set is found that has multiple dispense drugs matched to different Orderable Items, the Order Set is not converted. A mail message is sent to all holders of the RPHARM key with these Order Sets identified.

### **Verification Data Conversion**

Additional cross references have been added to identify orders which have not been verified by nursing or pharmacy.

Inpatient Medications protocols will be installed into the PROTOCOL file (#101). These protocols will be used for Inpatient Medication's interactions with CPRS, and to trigger the appropriate order action when a patient movement is entered by MAS.

The data in the ACTIVITY LOG REASON file (#53.3) will be deleted and rebuilt. This will be done to allow new entries to be added, and to update several existing entries.

Inpatient Medications List Templates will be installed into the LIST TEMPLATE file (#409.61). These will be used for Inpatient Medication's ListMan order processing functions.

These options are no longer used in Version 5.0 and will be deleted as part of the installation process.

PSJ QUICK ORDER REPORT  
PSJ QUICK ORDERS  
PSJ QUICK ORDERS MENU  
PSJI NON-VERIFIED ORDERS

### **Input Templates**

The functionality provided by the following input templates is now available through the Pharmacy Data Management (PDM) package and will be deleted as a part of the Version 5.0 installation.

PSJ EXT SCHEDULE EDIT  
PSJ PD EDIT  
PSJ SCHEDULE EDIT  
PSJFILED  
PSJI ADD  
PSJI SOL  
PSJQ FLUID  
PSJQ MED  
PSJUPDE

## ***Inpatient Medications Options***

There is no top-level Inpatient Medications menu. The Inpatient Medications options are contained within the IV and Unit Dose top-level menus (PSJI MGR and PSJU MGR respectively).

## **Inpatient Medications Security Keys**

<b>Key</b>	<b>Assignment</b>
PSJ RPHARM	All pharmacists; designates the user as a PHARMACIST
PSJ RNURSE	Nurses
PSJ PHARM TECH	Pharmacy Technician
PSJI MGR	Inpatient coordinator, for access to the PSJI MGR option.
PSJI PURGE	Inpatient coordinator, for purging of expired orders.
PSJU MGR	Unit Dose package coordinator and/or Inpatient supervisor, for editing of basic background files and various management reports.

The PSJ RPHARM supersedes the other two keys - if a user is assigned the PSJ RPHARM key and either of the other two keys, the user will be seen by the package as a Pharmacist. In the same manner, the PSJ RNURSE key supersedes the PSJ PHARM TECH key.

## ***Auto-Discontinue Setup***

The following parameters deal with auto-discontinuing patients' orders whenever patients are transferred between wards, services, or to Authorized or Unauthorized Absence.

To edit the AUTO-DISCONTINUE SET-UP from within the IV Medications module, choose the following sequence of options:

```
IV Menu Option
    Supervisor's Menu (IV)
        Auto-Discontinue Set-Up
```

To edit the AUTO-DISCONTINUE SET-UP from within the Unit Dose Medications module, choose the following sequence of options:

```
Unit Dose Medications Option
    Supervisor's Menu
        Parameters Edit Menu
            AUto-Discontinue Set-Up
```

Refer also to the *Unit Dose User Manual* or the *IV User Manual*.

## ***Inpatient Medications, cont'd***

### ***Medication Administration Setup***

To edit the MAR parameters choose the following sequence of options:

Unit Dose Medications Option  
Supervisor's Menu  
Parameters Edit Menu  
Inpatient Ward Parameters Edit

### **Inpatient Meds and CPRS**

The Inpatient Medications' protocols for use with CPRS are automatically installed as part of the KIDS build process.

## **G-3.a IV Setup**

If your site is currently running Inpatient Medications Version 4.5, no additional set-up is required. Otherwise, do the following:

1. Enter package users into the system, assigning the following option as the primary menu option:

User	Primary Menu Option:
Nurses	PSJI USR1
Technicians	PSJI USR2
Pharmacists, Supervisors, and Pharmacy Package Coordinator	PSJI MGR

2. Key allocation: In order for the package coordinator to have access to the *Supervisor's Menu*, he or she must hold the PSJI MGR key. Certain users allowed to purge orders (usually the package coordinator) must hold the PSJI PURGE key.
3. The background option *PSJI BACKGROUND JOB* should be scheduled to run nightly by someone in your IRM Service or ADP Department. This option compiles the IV statistical data for each day.

### *Inpatient Medications, cont'd*

4. The functionality accomplished by the following options has been moved to PDM:

```
Primary Drug Edit [PSJ PRIMARY DRUG EDIT]
Additives File [PSJI DRUG]
Standard Schedule Edit (IV) [PSJI SCHEDULE EDIT]
Primary Solution File (IV) [PSJI SOLN]
Dispense Drug Fields [PSJU DRG]
MARK/Unmark Dispense Drugs For Unit Dose [PSJU MARK UD ITEMS]
Instructions (Medications) [PSJU MI]
MEDication Routes [PSJU MR]
Standard Schedule Edit [PSJU SCHEDULE EDIT]
```

### **Site Parameters (IV) [PSJI SITE PARAMETERS]**

This option allows the package coordinator to define the characteristics of the IV room and/or satellites to the package. Such things as manufacturing and delivery times, label size, use of suspense, and same day IV order expiration are identified. This information is stored in the IV ROOM file (#59.5). You must define at least one IV room in order for the IV module to function correctly. You can, at any time, alter the definition of the IV room, and you do not have to exit the module and re-enter for the change to be in effect.

To enter or edit the IV ROOM file, choose the following sequence of options:

```
IV Menu
    SUPervisor's Menu (IV)
        Site Parameters (IV)
```

*Refer also to the IV User Manual.*

### **G-3.b Unit Dose Setup**

#### **Menus and Security Keys**

*PSJU MGR* is the only menu to be assigned to the users of this package.

Key	Assignment
PSJU PL	This key locks the <i>Pick List Menu</i> [PSJU PLMGR]. Assign this key to the Pharmacists and/or Pharmacy technicians who will be using the <i>Pick List</i> options.
PSJU MGR	This key locks the <i>Supervisor's menu</i> [PSJU FILE]. Assign this key to the Pharmacy package coordinators and/or Supervisors.



**NOTE:** The PSJU RPH security key is no longer exported. You may wish to review and remove the key from options, if appropriate.



## *Unit Dose Setup, cont'd*

### **Files Needed to Run Unit Dose**

The following files must have data before the module can effectively run. See the Unit Dose Technical Manual for more information on each of the files:

DRUG file.

ORDERABLE ITEM.

WARD GROUP file.

MEDICATION ROUTES file.

INPATIENT WARD PARAMETERS file.

INPATIENT USER PARAMETERS file.



**NOTE:** The background option *PSJU BRJ* should be scheduled by someone in your IRM Service or ADP Department to run nightly. This option compiles the Unit Dose statistical data and purges information that has become out of date.

## H. Problem List

Problem List doesn't require any set-up for CPRS.

Patch GMPL\*2\*10 contains changes needed to support CPRS:

New APIs were created to provide data to CPRS.

# I. Radiology/Nuclear Medicine

## Radiology Patch RA\*4.5\*11

This purpose of this patch is to:

- support OE/RR v.3 (CPRS) nature of order activity functionality,
- support CPRS quick order conversion prior to installation of CPRS,
- provide a CPRS HL7 interface to purge orders,
- correct various bugs in the Rad/OE3 interface, and
- provide a few other miscellaneous interface fixes and enhancements.

All CPRS-related functionality will be “invisible” to ADPACs and end users until CPRS is installed.

- In the Rad/Nuc Med Reason file #75.2, field NATURE OF ORDER ACTIVITY (#4) has been added. After CPRS is installed, Rad/Nuc Med ADPACs will need to assign each reason in this file to a CPRS code. This code will determine (for order hold and cancel reasons) whether or not a chart copy will be printed, whether an electronic signature is needed, and whether this action should be printed on the CPRS summary. The *Reason Edit* [RA REASON EDIT] option has been modified to allow editing this new field if CPRS is installed. Prior to installing CPRS this field will also be “invisible.”
- The RACOMDEL routine included with this patch will be executed upon the installation of CPRS (OE/RR v3). If there are multiple entries in the Rad/Nuc Med Common Procedure file 71.3 pointing to the same procedure in the Rad/Nuc Med Procedure file #71, this routine will remove the duplicates, leaving the entry that is active on the common procedure list. It may also resequence the common procedure list causing the identifying numbers to change on user displays. This is necessary to insure that the orderable item updates sent from Rad/Nuc Med to CPRS work properly. This will have no effect on sites until CPRS is installed.
- The [RA COMMON PROCEDURE EDIT] template for the Rad/Nuc Med Common Procedure file #71.3 and routines RAORDU, RAORDU1 and RAMAIN2 have been modified to support a future OE/RR 2.5 patch which will convert quick orders prior to installation of CPRS (OE/RR 3.0). Changes in Rad/Nuc Med will use the existence or absence of file 101.41 to detect whether the OE/RR patch is installed. If the OE/RR patch is installed, the orderable item update HL7 messaging will be turned on to continuously update the new CPRS file whenever Rad/Nuc Med ADPACs add/edit a procedure or change its status on the common procedure lists.

## J. Text Integration Utilities (TIU)

The Text Integration Utilities (TIU) package consists of Progress Notes, Discharge Summary, and a set of utilities for managing clinical documents. Progress Notes and Discharge Summary can be accessed directly through TIU for one or more patients, or through CPRS for individual patients. TIU is closely tied to Authorization/Subscription Utility (ASU), which helps to define roles and business rules (who can do what to TIU documents). Other clinical document applications, such as Consult/Request can use its utilities for uploading documents into **VISTA**, or to take advantage of the document definition hierarchy benefits, boilerplating, and other features of TIU.

### Setting up Consult/Request Tracking in TIU

You can set Consults up as a separate Class (comparable to Discharge Summary or Progress Notes) or you can define Consults as a Document Class under Progress Notes. There are pros and cons to either strategy.

#### *A: Create Consults as an independent CLASS, under Clinical Documents*

- Pro:**
1. Provides a *clear* separation of Consults from Progress Notes, and minimizes the number of choices for the end-user.
  2. Simple, with few concerns for maintainability (e.g., no question as to whether heritable methods and properties of Progress Notes were appropriately overridden, etc.).
- Con:**
1. Not necessarily consistent with the way providers have been documenting their Consult Results in the past. (i.e., if they've been using PN titles to “result” consults, and referring to the notes on the 513's in the past, this will be a departure from that practice).
  2. Limits flexibility of access to the information. (i.e., if set up this way, they may only access the data through Integrated Document Management options on the TIU side, and through the Consults tab of the CPRS chart).

#### *B: Create Consults as a Document Class under Progress Notes.*

- Pro:**
1. Consistent with the way many providers have been documenting their Consult Results in the past.
  2. Enhances flexibility of access to the information. (allows access to data through any option in TIU, as well as through *either* the Consults or Progress Notes tabs of the CPRS chart).
- Con:**
1. Does not provide a clear separation of Consults from Progress Notes, and may offer too many choices for the end-user.
  2. Complex, with some concerns for maintainability (e.g., if printing or filing appear incorrect, may result from heritable methods and properties of Progress Notes not being appropriately overridden, etc.).

## *TIU, cont'd*

### **Define CONSULTS for TIU/CT Interface**

Patch TIU\*1.0\*4 contains an option that allows you to set Consults up as part of the Document Definition hierarchy. The following is a description of the option and the other steps necessary for allowing Consults to be accessed through TIU and CPRS.

1. Select the option *Define Consults for TIU/CT Interface* and enter the relevant information.

```
Select OPTION NAME: TIU DEFINE CONSULTS      Define CONSULTS for
TIU/CT Interface
Define CONSULTS for TIU/CT Interface

I'm going to create a new Document Definition for CONSULTS now.

GREAT! A new Document Definition has been created for CONSULTS.
Next, you need to decide whether you want CONSULTS to be set up
as a separate CLASS (comparable to DISCHARGE SUMMARY or PROGRESS
NOTES), or whether you want CONSULTS defined as a DOCUMENT CLASS
under PROGRESS NOTES. The benefits of each strategy are outlined
in the POST-INSTALLATION instructions for this patch.

NOTE: If you're not yet CERTAIN which strategy you want your site
to adopt, then quit here, and get consensus first (it's easier to
get permission than forgiveness, in this case)!

      Select one of the following:

              CL          Class
              DC          Document Class

Define CONSULTS as a CLASS or DOCUMENT CLASS: DC  Document Class

Okay, you've indicated that you want to make CONSULTS a Document Class.

      Okay to continue? NO// YES

FANTASTIC! Your NEW DOCUMENT CLASS CONSULTS will now be added under
the PROGRESS NOTES Class...

Okay, I'm done...Please finish your implementation of CONSULTS by adding
any Titles as appropriate using the Create Document Definitions Option
under the TIUF DOCUMENT DEFINITION MGR Menu, as described in Step #3 of
the Post-Installation Instructions.

Press RETURN to continue...
```

## TIU, cont'd

2. You can verify that the upload header is appropriately defined for Consults using the option [TIU UPLOAD HELP]. The output will look something like this:

```
<Message Header Signal>:      CONSULTS
TITLE:                        CARDIOLOGY CONSULT
SSN:                          555-12-1234
VISIT/EVENT DATE:             5/13/97@08:00
AUTHOR:                       HOWSER,DOOGEY
TRANSCRIBER:                  K5420
DATE/TIME OF DICTATION:        5/13/97@11:00
LOCATION:                       MEDICAL-CONSULT 6200
EXPECTED COSIGNER:             WELBY,MARCUS
CONSULT REQUEST NUMBER:        1455
<Begin Text Signal>
CONSULTS Text
```

- File should be ASCII with width no greater than 80 columns.
  - Use "===" for "BLANKS" (word or phrase in dictation that isn't understood), where <Message Header Signal> and <Begin Text Signal> will appear as you've defined them in your Upload Parameters for your site (e.g., \$HDR and \$TXT, etc.).
3. Use the *Create Document Definitions* option [TIUFC CREATE DDEFS MGR], under the IRM Maintenance Menu option [TIU IRM MAINTENANCE MENU], to construct a new document definition sub-tree for Consults that looks something like this:

Edit Document Definitions		Sep 03, 1997 11:59:04	Page: 1 of 1
BASICS			
	Name		Type
1	CLINICAL DOCUMENTS		CL
2	+DISCHARGE SUMMARY		CL
3	+PROGRESS NOTES		CL
4	CONSULTS		DC
5	MEDICINE CONSULTS		DC
6	MEDICINE CONSULT		TL
7	ENDOSCOPY		TL
8	CARDIOLOGY CONSULTS		DC
9	CARDIOLOGY COSULT		TL
10	ELECTROCARDIOGRAM		TL
11	ECHOCARDIOGRAM INTERPRETATION		TL
12	+ADDENDUM		DC
<b>?Help    &gt;ScrollRight    PS/PL PrintScrn/List    +/-    &gt;&gt;&gt;</b>			
Expand/Collapse		Detailed Display/Edit	Items: Seq Mnem MenuTxt
Jump to Document Def		Status...	Delete
Boilerplate Text		Name/Owner/PrintName...	Copy/Move
Select Action: Quit//			

### *TIU, cont'd*

The example above suggests a Service-oriented set of Document Classes with one or more titles under each. Of course, just like Progress Notes, these can include boilerplate text with embedded objects. It will probably take some time, with substantial cooperation between your Clinical Coordinator, IRMS, and the Consulting Services, to develop a complete set of Document Definitions for Consults at your site.

4. Next, define a set of Document Parameters for the new Consults class, using the Document Parameter Edit [TIU DOCUMENT PARAMETER EDIT] option under the TIU IRM MAINTENANCE MENU option, as follows:

```
1      TIU Parameters Menu ...
2      Document Definitions (Manager) ...
3      User Class Management ...

Select TIU Maintenance Menu Option: 1  TIU Parameters Menu

1      Basic TIU Parameters
2      Modify Upload Parameters
3      Document Parameter Edit
4      Progress Notes Batch Print Locations
5      Division - Progress Notes Print Params

Select TIU Parameters Menu Option: DOCument Parameter Edit

First edit Institution-wide parameters:

Select DOCUMENT DEFINITION: CONSULTS          DOCUMENT CLASS
...OK? Yes// <Enter>  (Yes)

DOCUMENT DEFINITION: CONSULTS// <Enter>
REQUIRE RELEASE: n      NO
REQUIRE MAS VERIFICATION: u      UPLOAD ONLY
REQUIRE AUTHOR TO SIGN: y      YES
ROUTINE PRINT EVENT(S): <Enter>
STAT PRINT EVENT(S): <Enter>
MANUAL PRINT AFTER ENTRY: y      YES
ALLOW CHART PRINT OUTSIDE MAS: y      YES
ALLOW >1 RECORDS PER VISIT: n      NO
ENABLE IRT INTERFACE: <Enter>
SUPPRESS DX/CPT ON NEW VISIT: <Enter>
EDITOR SET-UP CODE: <Enter>

If document is to be uploaded, specify Filing Alert Recipients:
Select FILING ERROR ALERT RECIPIENTS: _____

Now enter the USER CLASSES for which cosignature will be required:
Select USERS REQUIRING COSIGNATURE: STUDENT// _____
Now enter the DIVISIONAL parameters:

Select DIVISION: [optional...you probably won't need to set up
auto-printing devices]

Press RETURN to continue...
```

Identify local recipients as appropriate

Identify per local requirements

***TIU, cont'd***

5. Finally, use the option to Manage Business Rules, under the User Class Management Menu to specify the following rules, allowing Linking (or re-linking) of TIU documents with “requests” in a client application:

- |   |   |
|---|---|
| 1 | An UNSIGNED (CLASS) CLINICAL DOCUMENT may be LINKED by An AUTHOR/DICTATOR           |
| 2 | An UNCOSIGNED (CLASS) CLINICAL DOCUMENT may be LINKED by An EXPECTED COSIGNER       |
| 3 | A COMPLETED (CLASS) CLINICAL DOCUMENT may be LINKED by A CHIEF, MIS                 |
| 4 | An UNSIGNED (CLASS) CLINICAL DOCUMENT may be LINKED by A MEDICAL RECORDS TECHNICIAN |



## V. Troubleshooting

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☛ **NOTE:** See the CPRS Troubleshooting page on the CPRS home page:

[vista.med.va.gov/cprs/](http://vista.med.va.gov/cprs/)

**Q.** How do sites handle document verification (nurse and clerk)? Do they still print 24-hour summaries, chart copies, etc. for nurses and clerks to initial? How would they know, otherwise, what's been done?

**A.** West Palm Beach requires online verification. Nurses do the majority of the verification, and they do this online, periodically throughout the day, at designated workstations on the wards or clinics. Some copies are printed and put in the chart for contingencies and backup, but basically, it's a paperless system.

**Q:** Where do you enter comments on an order?

**A:** You can add them under Ward Comments, under the Flag action, or in a Notification.

**Q.** What are the benefits of a GUI over the traditional **VISTA** programs or the List Manager version of CPRS?

**A.** A Windows-type environment (GUI) allows you to do many things easier and more efficiently. The visibility and accessibility of many components of a patient record allow you to move among them more freely to review and link data. You can choose your own workflow rather than having it dictated by the computer in a sequential way. Sometimes, the traditional roll 'n' scroll and List Manager have advantages. For straightforward data entry, these methods can be faster and less complex.

**Q:** My List Manager Screens aren't displaying or scrolling right; are there any reasons for this, or settings I can change?

**A:** You may have to update the Terminal Type file for the VT100. If the "Insert Line" field is empty, which for some reason is not uncommon, this will cause List Manager to revert back to scroll mode - which may also be contributing to the weirdness you've been seeing on the screen.

**Q:** Chart copies are not printing to the clinics when placing med orders thru the GUI. I have the print parameters for Location set to print a chart copy to print to specific devices and under packages (still within the Location Print Parameter setup) to print outpatient meds to a specific device in Pharmacy. Orders are printing to pharmacy, however, the chart copies are not printing to the location (which happens to be clinic locations). Works ok in List Mgr. Question: Is the GUI capable of handling this functionality?

**A:** Printing of chart copies works in the GUI if the location is set up to auto-print. The GUI can't prompt for a chart copy print device. You may want to use the List Values option on the XPAR MENU TOOLS option to check the values for the parameters ORPF PROMPT FOR CHART COPY and ORPF CHART COPY PRINT DEVICE. If the values for the location in question are DON'T PROMPT and a valid device is listed, the chart copies should auto print.

**Q:** How do you correct Vitals entered in error in the GUI?

**A:** You have to enter a new order to replace the incorrect one. Since the Vitals/Measurement files will not store more than one of any one type of measurement for one encounter (patient, location, date/time), if you enter a new vital for the encounter, it replaces the old one.

**Q:** When our clinicians are selecting an image type while ordering radiology exams in the GUI, they get a message box that says "not a valid integer value." It appears to be machine-specific (3 or more PCs are experiencing it). Any ideas?

**A:** Two sites reported this problem. In one case it was Express Meter running as a local process on the workstations. They ended the EM32.EXE process on the local workstation and this resolved the problem. In the other case, it was the Microsoft Intellipoint program, and they removed POINT32.EXE to correct the problem.

**Q:** Our CAC and others reported that when a name is typed in the Patient Selection box (before selection is entered), a display of the patient's SSN, DOB, and age automatically appears. This is not consistent with the way VistA handles sensitive patients. The appearance of the display is indiscriminate, and occurs for all types of patients. Can this be changed in a future version of the CPRS GUI?

**A:** In doing some investigation in a roll-and-scroll as opposed to GUI, you see the same thing. In a roll-and-scroll, the following appears:

```
Select Patient: Change View// LEE,SABRINA          11-11-50      123223456
NO      NSC VETERAN

*** WARNING ***
*** RESTRICTED RECORD ***
* * * * *
* This record is protected by the Privacy Act of 1974. If you elect      *
* to proceed, you will be required to prove you have a need to know.    *
* Accessing this patient is tracked, and your station Security Officer  *
* will contact you for your justification.                               *
* * * * *
Do you want to continue processing this patient record? No// (No)
```

In roll-and-scroll, you still see the SSN, DOB, and Service connection as these are identifiers.

In the CPRS GUI, at the Patient Selection window, if the same patient is clicked on, we see just below and to the left of the OK and CANCEL buttons:

LEE,Sabrina SSN: 123-22-3456 DOB: Nov 11,1950 Female, age 48 Veteran

So both formats, although displayed differently, are showing the same data.

If this isn't the way you are seeing the lookup on the VistA side, it may be because you have a local modification in place to hide identifiers if the patient is sensitive.

## MISS Position

Here is input from the security folks on this issue in relation to the CPRS GUI lookup—the original dialog as well as the response from MISS.

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Original Message sent on May 1, 1998:

We had a site raise a concern about the way CPRS does the display of identifiers from the patient selection screen. I feel we're mimicking what is done on the roll and scroll (DPTLK) side of things, but I'd like to start a dialog.

When you type in a partial name or ?? in DPTLK, you get a list of choices to choose from. After the patient name, the date of birth, SSN, and patient type are displayed along with locally created identifiers. Nothing is stored. In the GUI, a list box is displayed of patient names. If you highlight the patient name, the above information displays to the right of the listbox. The site in question feels this is a confidentiality issue. Again, nothing is stored in terms of logging a hit on a sensitive record until the record is actually selected from the list. In MAS, this issue came up at least once a year. There were always requests for items to be left off when there was a sensitive patient involved. The problem was always pointed out was that not showing the information could lead to the wrong patient being selected. Additionally, it was pointed out that users sign an access agreement letter agreeing to not use the information in the system other than for official business. To my knowledge, no change was ever approved.

The particular site in question has modified DPTLK locally to NOT show any identifiers for a sensitive patient. They are asking for the same change to be made nationally with the GUI. I guess the bottom line is there are two issues:

1. Do you feel we are sufficiently mimicking what is in DPTLK?
  2. Are there changes planned to DPTLK to address this issue?
- 

Response from Sarah Daly, MISS: This is a frequently asked question by ISOs and employees. The purpose of presenting these data fields to users is to uniquely and unambiguously identify computer entries. In this case the data fields are people's

identifiers. This practice is established in tradition by long use in DHCP. This is a privacy issue only in the context that the information is used subsequently to invade the individual's privacy. The security issue is loss of confidentiality.

The following three paragraphs outline VHA's countermeasures against the threat of breach of confidentiality, including this instance of it.

1. VHA's information security program emphasizes training of all users. This includes sensitizing users to the responsibility they have for maintaining the confidentiality of information they access, view, and use. They are responsible for using these data in a pre-determined manner.
2. In addition, DHCP has technical mechanisms built in (password challenges, menus, keys, access attributes) that can limit access of data to only that set of users that need them in the discharge of their official duties. The system incorporates mechanisms for applying and reviewing audits of system events, including the ability to follow user activity. Facilities can apply additional security on locally-selected records to detect who accessed the records. This is the "sensitive record" review.
3. Finally, facility management has staff in place that manages all the training, technical, and administration components of the system. This includes periodic review of information security.

When combined with administrative and legal recourse that can be taken against violators, these mechanisms and procedures ensure that personal data are protected to the extent required to accommodate both privacy concerns and easy data access. The VA's O.G.C. (Office of the General Counsel) has provided an Advisory Opinion (AO 1-93) on this subject. They interpreted Privacy Act as allowing VA to use SSNs and dates of birth as identifiers to look up and select patients.

## Order Checks and Notifications Troubleshooting

### Key Options for Troubleshooting Notifications

#### Notification Mgmt Menu

- Display the Notifications a User Can Receive
- Determine Recipients for a Notification
- Display Patient Alerts and Alert Recipients

#### Patient List Mgmt Menu

- Display User's Teams
- Display Patients Linked to a User via Teams

### Key Option for Troubleshooting Order Checking

#### Order Checking Mgmt Menu

- Display the Order Checks a User Can Receive

**Q:** When I write an order for digoxin and quinidine at the same time, the order check does not seem to take place until after it would with an order check between a new med and an old one. Did I understand that correctly?

**A:** Your observations are correct regarding the order checking against new meds vs. old meds. Almost all medication-related order checks are performed by querying the pharmacy package. During the ordering process, pharmacy does not know about the meds placed during the ordering session. Meds are not “released” to the pharmacy service until they have been signed so checks between meds placed in the session cannot occur. Checks against meds already released to Pharmacy occur within the ordering process. Checking is postponed until after the session is completed (just before electronic signature), because order checks are fairly resource-intensive and this minimizes the delays between prompts.


**Q:** I’m having trouble disabling duplicate order checks. Can you give more information about how the different levels affect this?

**A:** You can disable the duplicate order checks through the Order Checking Mgmt menu, option #1 Enable/Disable an Order Check. Do this at the Division level if the site is “multi-division”; otherwise, do it at the System level. Of course, if one of the users has the User level value set to “Enabled” they will still get the order check. Or if the patient Location value for the patient they are working with is “Enabled,” they will get the Order Check. Or if the user’s service has the value of “Enabled,” users of that service will get that Order Check. Most Order Checks are exported with the Package level set to “Enabled.”

## *Order Checks and Notifications Troubleshooting, cont'd*

**Q:** Why don't some lab results produce notifications?

**A:** Some lab tests are not meant to be resultated. This is indicated in the Lab test file (#60) and the Orderable Items file (#101.43). In both files there is a field called TYPE. The field in both files is a set of codes which indicates if the lab test is to be resultated or not. The codes consist of I:Input, O:Output, B:Both and N:Neither. If the TYPE for a lab test in the Lab file or Orderable Item file is set to "I" or "N", results will not be sent by lab. This rarely is set incorrectly, but is something to look at when troubleshooting lab results-related notifications/alerts such as Lab Results, Abnormal Lab Results, and Critical Lab Results. If a lab results-related notification is not firing for a particular lab test, check the TYPE field for that test in the Lab Test and Orderable Items files. If it is "I" or "N" in either file, the results will not be posted via HL7 and the alert will not be sent.

 **NOTE:** Both “Enabled” and “Mandatory” override lower-level entity values. Both override a system value of “Disabled.” This was requested by users to reduce confusion over the two values and how they impact notification processing.

The lab series of alerts have been altered to work in conjunction as follows:

1. Users who work from lab results should have the Lab Results alert enabled and the Abnormal Lab Results alerts disabled.
2. All other users (most clinicians) should enable the Abnormal Lab Results (Action) or Abnormal Lab Results (Info) alerts and disable the Lab Results alert.
3. The Critical Lab Results alerts are usually mandatory and sent to everyone linked to the patient or the order.
4. Abnormal Lab Results (action) and Lab Results have follow-up actions that show the results of the order for abnormal/critical tests and normal tests. For most users, they should have one of these alerts enabled but not both.
5. Abnormal Lab Results (Info) and Critical lab results (Info) display the result and collection date/time in the message and have no follow-up.

With these alerts, users can get alerts for all or abnormal lab results, then see the actual results of the order via follow-up action. To supplement this, critical lab results are displayed.

Another item to remember is that alerts can be disabled for a patient location. This feature of CPRS was specifically included to reduce the number of abnormal and critical lab alerts for patients in critical care units like ICU. Patient location is enabled or disabled by the *Enable/Disable Notifications* option, then selecting “Location.” This option is not available on end user Notification Mgmt menus, only via ORMGR and clinical coordinator menus.

### ***Order Checks and Notifications Troubleshooting, cont'd***

**Q:** Is there is a way to downgrade a “critical” order check to “significant” so that an override reason is not required?

**A:** To reduce the “Clinical Danger Level” of an order check, you need access to the Order Checking Management menu for managers. (This parameter is set at the Division or System level so it is not available to all users.) Under the Order Checking Mgmt menu select *Set Clinical Danger Level for an Order Check*. Depending on if you are setting it for a single site or more than one site in a consolidated system, select Division or System. Next enter DUP DRUG ORDER as the order check. Enter “Moderate” as the value. Only “High” valued order checks require an override reason. You should no longer be prompted for override reason for this order check.

**Q:** In version 2.5, there was a Clinical Coordinator option in ORLB TEAM MGMT to: TRIGGER A TEST NOTIFICATION (ORB NOT TEST). This action option runs a routine which triggers a test notification. The notification is processed and sent to the identified recipient. Because the new notifications module is much more complex, I think having the ability to fire off a test alert would aid Clinical Coordinators & CPRS Mgrs in troubleshooting and assisting users.

**A:** This already exists but with greatly extended flexibility. Try using the *Determine Recipients for a Notification* option under the Notification Mgmt menu. Another way to trigger a “test” notification/alert is to “flag” an existing order. The Order Requires Clarification alert will go to the provider who entered /requested the order. You could set up a test order on a test patient and flag/unflag the order forever to keep triggering the alert.

## VI. Glossary

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<b>ASU</b>	Authorization/Subscription Utility, a utility that allows sites to associate users with user classes, allowing them to specify the level of authorization needed to sign or order specific document types and orderables.
<b>Action</b>	A functional process that a clinician or clerk uses in the a List Manager computer program. "Edit," "Create," and "Find" are examples of actions.
<b>Activate</b>	To make an inactive window active by clicking anywhere in it.
<b>AICS</b>	Automated Information Collection System, formerly Integrated Billing; software supported by MCCR, producing scannable Encounter Forms.
<b>Alerts</b>	Brief online notices that are issued to users as they complete a cycle through the menu system. Alerts are designed to provide interactive notification of pending computing activities, such as the need to reorder supplies or review a patient's clinical test results. Along with the alert message is an indication that the View Alerts common option should be chosen to take further action.
<b>Application Coordinator (ADPAC)</b>	A person at a hospital or clinic assigned to coordinate the automated data processing (ADP) activities in a specific department. This person is usually a specialist in his or her department (e.g., a medical technologist or a pharmacist) first and the applications coordinator second. These specialists are also known as Clinical Coordinators or Clinical Application Coordinators (CAC) when they are associated with OE/RR, CPRS, and clinical applications.
<b>Application Programming Interface (API)</b>	Programmer calls provided for use by application programmers. APIs allow programmers to carry out standard computing activities without needing to duplicate Kernel utilities in their own packages. APIs also further Database Administration (DBA) goals of system integration by channeling activities, such as adding new users, through a limited number of callable entry points.
<b>Boilerplate Text</b>	A pre-defined Progress Notes or Discharge Summary template containing standard text, with blanks to fill in for specific data about a patient.
<b>Broker</b>	See RPC Broker



## ***Glossary, cont'd***

<b>Chart Copy</b>	A copy of all current orders that appear on a patient's chart, using a pre-defined format. Each hospital can only have one format for Chart Copies. Chart copies can also be automatically printed on the ward. <b>This is the official copy for the medical record.</b>
<b>CIO Field Office</b>	Chief Information Office Field Office (formerly known as IRMFOs-- Information Resource Management Field Office and ISCs – Information Systems Centers). <b>VISTA</b> has nine CIOFOs, each responsible for developing assigned application packages and for supporting the medical centers' VISNs within the IRMFO region.
<b>Client</b>	A single term used interchangeably to refer to the user, the workstation, and the portion of the program that runs on the workstation. In an object-oriented environment, a client is a member of a group that uses the services of an unrelated group. If the client is on a local area network (LAN), it can share resources with another computer (server).
<b>Client Server Architecture</b>	A Network consisting of a workstation (client) and a central computer holding the database, linked by TCP/IP.
<b>Clinician</b>	A doctor or other provider in a medical center who is authorized to provide patient care.
<b>Component</b>	In Progress Notes, Components are "sections" or "pieces" of documents, such as Subjective, Objective, Assessment, and Plan in a SOAP Progress Components may have (sub)Components as items. They may have Boilerplate Text. Components may be designated SHARED.
<b>Consult/Request Tracking</b>	Also known as Consults. Consults can function as part of CPRS, independently as a standalone package, or as part of TIU). Consults are referrals of patients by the primary care physician to another hospital service/specialty, to obtain a medical opinion based on patient evaluation and completion of any procedures, modalities, or treatments the consulting specialist deems necessary to render a medical opinion. For instance, if a primary care physician orders a patient evaluation from Cardiology Service, and the cardiology specialist orders an Electrocardiogram (EKG) to complete the evaluation and provide an opinion concerning the patient's condition, this type of order is considered a "Consult."
<b>Control</b>	An object in a window on the screen which the user can cause action with visible results or change settings to modify a future action.
<b>COTS</b>	Commercial Off the Shelf ; products not developed by <b>VISTA</b> .

## ***Glossary, cont'd***

<b>Cover Sheet</b>	A screen of the CPRS patient chart that displays an overview of the patient's record, with tabs at the bottom representing components of a patient's chart.
<b>CWAD</b>	Crises, Warnings, Allergies/Adverse Reactions, and Advance Directives.
<b>Discharge Summary</b>	A discharge summary is a formal synopsis of a patient's medical care during a single hospitalization. It includes the pertinent diagnostic and therapeutic tests and procedures as well as the conclusions generated by those tests. A discharge summary is prepared for all discharges and transfers from a VA medical center or domiciliary or from nursing home care. The automated Discharge Summary module provides an efficient and immediate mechanism for clinicians to capture transcribed patient discharge summaries online, where they're available for review, signing, adding addendum, etc.
<b>DLL</b>	<p>Dynamic Link Library. A DLL allows executable routines to be stored separately as files with a DLL extension. These routines are only loaded when a program calls for them. DLLs provide several advantages:</p> <ol style="list-style-type: none"><li>1. DLLs help save on computer memory, since memory is only consumed when a DLL is loaded.</li><li>2. DLLs ease maintenance tasks. Because the DLL is a separate file, any modifications made to the DLL will not affect the operation of the calling program or any other DLL.</li><li>3. DLLs help avoid redundant routines. They provide generic functions that can be utilized by a variety of programs.</li></ol>
<b>Events</b>	An object-oriented term that represents user actions that a GUI application interface recognizes, such as a mouse click or pressing the down arrow key.
<b>GUI</b>	Graphical User Interface. A type of display format that enables users to choose commands, initiate programs, and other options by selecting pictorial representations (icons) via a mouse or a keyboard.
<b>Health Summary</b>	A <b>VISTA</b> product which can be viewed through CPRS. It includes snapshots of part or all of a patient's tests and results (based on how the site has it set up).
<b>HL7</b>	Communications standards/protocols to link different computer systems together.
<b>Icon</b>	A picture or symbol that graphically represents an object or a concept.

## ***Glossary, cont'd***

<b>IDCU</b>	The Integrated Data Communications Utility which is a wide area network used by VA for transmitting data between VA sites.
<b>Imaging</b>	A component of the patient chart; which includes Radiology, X-rays, Nuclear Medicine, etc.
<b>IRMS</b>	Information Resource Management Service. A service at VA medical centers responsible for computer management and system security.
<b>Modal</b>	A state or "mode" in which the user can only act or respond to a single dialogue box or window. You must select a response before you can exit or do anything else in the program.
<b>Modeless</b>	The user is free to select and act in any window.
<b>Namespacing</b>	A convention for naming <b>VISTA</b> package elements. The Database Administrator (DBA) assigns unique character strings for package developers to use in naming routines, options, and other package elements so that packages may coexist. The DBA also assigns a separate range of file numbers to each package.
<b>Notifications</b>	Alerts regarding specific patients that appear on the CPRS patient chart.
<b>OCIO</b>	Office of the Chief Information Officer, located in Washington, D.C. All CIO Field Offices ultimately report to this entity, which is subordinate to the Office of the Undersecretary for Health.
<b>Object-Based Programming</b>	Involves the use of components.
<b>Object-Oriented Programming</b>	Involves the creation of components. These components are self contained collections of data structures and routines that interact with other components or objects.
<b>OE/RR</b>	Order Entry/Results Reporting; a generic package developed to interface with all <b>VISTA</b> packages, now part of CPRS.
<b>Orderable Items</b>	Orderable items correspond to those services or products that may be requested and provided by the patient care services; can be things such as a lab test, an imaging procedure, or a medication. The ORDERABLE ITEM file (#101.43) contains the orderable items for each service; CPRS uses orderable items to identify the specific thing that has been ordered.

## ***Glossary, cont'd***

<b>Patient Postings</b>	A component of the patient chart; includes messages about patient; an expanded version of CWAD (see above).
<b>PCE</b>	Patient Care Encounter; a <b>VISTA</b> program that's part of the Ambulatory Data Capture Project (ADCP), and also provides Clinical Reminders, which appear on Health Summaries.
<b>PCMM</b>	Patient Care Management Module, a <b>VISTA</b> product that manages patient/provider lists.
<b>Print Formats</b>	
Service copy	Copies of orders and actions for a particular service that can be printed upon request for the use of that service. The service copy can also be set up for automatic printing at a defined location (usually in the service). Contains header, body, and footer.
Chart Copy	A copy of all current orders that appear on a patient's chart, using a pre-defined format. Each hospital can only have one format for Chart Copies. Chart copies can also be automatically printed on the ward. <b>This is the official copy for the medical record.</b>
Work Copy	A working copy of order(s) that will be kept
Requisition	A working copy of order(s) that will be sent with the order to the service.
Label	A copy of the order that is printed on a label to be stuck on the container of the order (e.g., a medication or a lab sample).
<b>Progress Notes</b>	The Progress Notes module of TIU is used by health care givers to enter and sign online patient progress notes and by transcriptionists to enter notes to be signed by caregivers at a later date. Caregivers may review progress notes online or print progress notes in chart format for filing in the patient's record.
<b>Remote Procedure Call</b>	A remote procedure call (RPC) is essentially some M code that may take optional parameters to do some work and then return either a single value or an array back to the client application.
<b>RPC Broker</b>	Tools to facilitate communications between M and windows.
<b>Requisition</b>	A working copy of order(s) that will be sent with the order to the service.
<b>Resource</b>	In <b>VISTA</b> , a method that enables sequential processing of tasks. The processing is accomplished with a RES device type designed by the application programmer and implemented by IRM. The process is controlled via the RESOURCE file (#3.54).
<b>Semi-modal</b>	A window or dialogue box that will yield focus to the parent window for some limited processing. Typically, semi-modal dialogue boxes remain in the foreground even after yielding focus.

## ***Glossary, cont'd***

<b>Server</b>	The computer where the data and the Business Rules reside. It makes resources available to client workstations on the network. In <b>VISTA</b> , it is an entry in the OPTION file (#19). An automated mail protocol that is activated by sending a message to a server at another location with the "S.server" syntax. A server's activity is specified in the OPTION file (#19) and can be the running of a routine or the placement of data into a file.
<b>Service Copy</b>	Copies of orders and actions for a particular service that can be printed upon request for the use of that service. The service copy can also be set up for automatic printing at a defined location (usually in the service). Contains header, body, and footer.
<b>TIU</b>	Text Integration Utilities, a <b>VISTA</b> package which contains Consults Results, Progress Notes, and Discharge Summary. Other text-based packages can use its database structure and upload utilities. Consults and CPRS both have interfaces with TIU.
<b>Usability</b>	The ease and comfort a program provides to people. Programs that are user-centered rather than machine or programmer-centered.
<b>User Class</b>	The basic component of ASU (Authorization/ Subscription Utility). The User Class file contains the different categories of users within a hospital. ASU allows sites to designate who is authorized to do what.
<b>User-Centered</b>	A program designed to match the way people do things
<b>User Interface</b>	The way the package is presented to the user, such as Graphical User Interfaces that display option prompts, help messages, and menu choices, the List Manager User Interface (described at the beginning of this manual), and the roll and scroll interface, the traditional <b>VISTA</b> terminal-based user interface.
<b>VHA</b>	Veterans Health Administration
<b>VISN</b>	Veterans Integrated Service Networks, geographic groupings of VA Medical Centers which together share resources and collaborate to maximize use of resources and efficiently meet the needs of veterans in their service areas.
<b>VISTA</b>	(VHA Information Systems & Technology Architecture, formerly DHCP (Decentralized Hospital Computer Program), the VA's comprehensive, integrated, medical center computer system. It consists of hardware, software packages, and comprehensive support for system-wide and station-specific, clinical and administrative automation needs.
<b>Window</b>	An object on the screen that presents information such as a document or message.

## VA and VISTA Acronyms

Acronym	Meaning
<b>AAC</b>	Austin Automation Center
<b>AACS</b>	Automated Allocation & Control System
<b>AC</b>	Ambulatory Care
<b>ACG</b>	Ambulatory Care Group (from Provider Profiling Project – VISN 20)
<b>ACIS</b>	Ambulatory Care Information System (formerly PACE)
<b>ACOS</b>	American College of Surgeons
<b>ACRP</b>	Ambulatory Care Reporting Project
<b>ADP</b>	Automated Data Processing
<b>ADPAC</b>	Automated Data Processing Application Coordinator
<b>AEMS</b>	Automated Medical Equipment Reporting System (Engineering)
<b>AICS</b>	Automated Information Collection System v.3.0
<b>AMIA</b>	American Medical Informatics Association
<b>AMIE</b>	Automated Medical Information Exchange
<b>AMIS</b>	Automated Management Information System
<b>ANSI</b>	American National Standards Institute
<b>ANSOS</b>	a Nursing Scheduling COTS
<b>AP</b>	Anatomic Pathology
<b>API</b>	Application Programming Interface
<b>AR</b>	Accounts Receivable
<b>ART</b>	Adverse Reaction Tracking V. 4.0, formerly Allergy Tracking System
<b>AR/WS</b>	Automatic Replenishment/Ward Stock (a Pharmacy module)
<b>ASI</b>	Addictive Substance Interview
<b>ASU</b>	Authorization/Subscription Utility
<b>BBS</b>	Bulletin Board System
<b>BDK</b>	Broker Development Kit
<b>BEST</b>	Business Enterprise Solutions & Technologies Service
<b>C&amp;P</b>	Compensation & Pension
<b>CAC</b>	Clinical Application Coordinator
<b>CAIRO</b>	Center for Applied Research and Operations
<b>CALM</b>	Centralized Accounting for Local Mgmt (replaced by FMS)
<b>CAT</b>	Computerized Axial Tomography
<b>CBOC</b>	Community Based Outpatient Clinics
<b>CIO</b>	Chief Information Officer
<b>CIOFO</b>	Chief Information Office Field Office
<b>CIRN</b>	Clinical Information Resources Network
<b>CMOP</b>	Consolidated Mail Outpatient Pharmacy
<b>CMR</b>	Consolidated Memorandum of Receipt Official (new official for IFCAP w/Eqpmt Turn-In/Request Module)
<b>COD</b>	Clinical Objects Dictionary (w/b nat'l VHA std vocab for clin concepts)
Acronym	Meaning

<b>COS</b>	Chief of Staff
<b>COTS</b>	Commercial Off-the-shelf products
<b>CPRS</b>	Computerized Patient Record System - formerly OE/RR
<b>CPT</b>	Current Procedural Terminology
<b>CPU</b>	Central Processing Unit
<b>DEA</b>	Drug Enforcement Agency
<b>DHCP</b>	Decentralized Hospital Computer Program Dynamic Host Control/Configuration/Communication Protocol
<b>D&amp;PPM</b>	Drug and Pharmaceutical Products Mgmt V. 2.0
<b>DLL</b>	Dynamic Link Library (file)
<b>DMMS</b>	Decentralized Medical Management System
<b>DNS</b>	Domain Name Service (for locating Internet addresses)
<b>DOB</b>	Date of Birth
<b>DoD</b>	Department of Defense
<b>DOD</b>	Date of Death
<b>DOM</b>	VA Domiciliary
<b>DPC</b>	Austin Data Processing Center
<b>DSM</b>	Digital Standard MUMPS
<b>DSM-IV</b>	Diagnostic & Statistical Manual of Mental Disorders, 4th edition
<b>DSS</b>	Decision Support System
<b>DSS</b>	Document Storage Systems (vendor)
<b>DUE</b>	Drug Use Evaluation
<b>EDR</b>	Event Driven Reporting
<b>E3R</b>	Electronic Error and Enhancement Report (on Forum)
<b>EIS</b>	Executive Information System
<b>EPI</b>	Emerging Pathogens Initiative
<b>EUCLID</b>	a site-developed (Boise VAMC) computerized patient record system
<b>FIPS</b>	Federal Information Processing Standards
<b>FIRMAC</b>	Field Information Resource Mgmt Advisory Committee
<b>FM</b>	VA FileMan
<b>FMS</b>	Financial Management System
<b>FTEE</b>	Full-time Employee Equivalent
<b>FTP</b>	File Transfer Protocol
<b>GAO</b>	General Accounting Office
<b>G-CPRS</b>	Government Computerized Patient Record System, a VA, DOD, HIS project to integrate the automated patient record
<b>GRECC</b>	Geriatric Research, Education and Clinical Center
<b>GUI</b>	Graphical User Interface
<b>HBHC</b>	Hospital-Based Home Care
<b>HCFA</b>	Health Care Financing Administration
<b>HEC</b>	Health Eligibility Center
<b>HIMSS</b>	Health Information Management System Society
<b>Acronym</b>	<b>Meaning</b>
<b>HINQ</b>	Hospital INquiry

<b>HL7</b>	Health Level 7, an international communications protocol. Also refers to the VISTA infrastructure package, which facilitates use of this messaging system.
<b>HLLP</b>	Hybrid Lower Level Protocol
<b>HOST</b>	Hybrid Open Systems Technology
<b>HSR&amp;D</b>	Health Services Research & Development
<b>IB</b>	Integrated Billing
<b>ICD-9</b>	International Classification of Diseases, 9th ed.
<b>ICR</b>	Immunology Case Registry
<b>IDCU</b>	Integrated Data Communications Utility
<b>IFCAP</b>	Integrated Funds Distribution, Control Point Activity
<b>IG</b>	Inspector General
<b>IHS</b>	Indian Health Service or Integrated Hospital System (HOST)
<b>IP</b>	Internet Protocol
<b>IRA</b>	Initial Request Analysis
<b>IRM</b>	Information Resources Management
<b>IRT</b>	Incomplete Record Tracking
<b>IVM</b>	Income Verification Matching
<b>JCAHO</b>	Joint Commission on Accreditation of Hospitals
<b>KIDS</b>	Kernel Installation & Distribution System
<b>LEDI</b>	Laboratory Electronic Data Interchange (a new module of Lab that allows labs to send data to each other )
<b>LOINC</b>	Logical Obsvtn Id'r Nms & Codes (standard scheme for coding Lab tests)
<b>MAR</b>	Medical Administration Record(s)
<b>MAS</b>	Medical Administration Service - now PIMS
<b>MCCR</b>	Medical Care Cost Recovery
<b>MDC</b>	M Development Committee
<b>MediPhor</b>	Clinical workstation commercial product - HOST
<b>MIME</b>	Multimedia Internet Mail Extensions
<b>MIS</b>	Medical Information Section
<b>MISD</b>	Management Infrastructure Development (Albany, San Francisco, Wash DC CIO Field Offices)
<b>MIT</b>	Means Test Indication
<b>MPD</b>	Minimal Patient Dataset
<b>MPI</b>	Master Patient Index (was Master Veteran Record)
<b>MRT</b>	Medical Record Technician
<b>MRTS</b>	Messaging Routing and Translation System
<b>MSM</b>	Micronetics Standard MUMPS (replaced by OpenM/Avanti)
<b>MUMPS</b>	Massachusetts General Hospital Utility Multiprogramming (now M)
<b>MVR</b>	Master Veteran Record (now Master Patient Index )
<b>NANDA</b>	Nursing terminology coding scheme
<b>Acronym</b>	<b>Meaning</b>
<b>NDF</b>	National Drug File
<b>NLT</b>	National Laboratory Test



<b>NOIS</b>	National On-line Information Sharing system
<b>NPCDB</b>	National Patient Care Data Base
<b>NPF</b>	New Person File
<b>NTEO</b>	National Training & Education Office (of OCIO)
<b>NVS</b>	National VISTA Support (formerly Customer Support), part of Customer Services
<b>ODBC</b>	Open Database Connectivity
<b>OE/RR</b>	Order Entry / Results Reporting - now CPRS
<b>OIG</b>	Office of Inspector General
<b>OPC</b>	Outpatient Clinic
<b>PAID</b>	Personnel & Accounting Integrated Data
<b>PANDAS</b>	Patient Encounter Data Acquisition System
<b>PCE</b>	Patient Care Encounter
<b>PCHS</b>	Federal equipment purchasing contract
<b>PCMM</b>	Primary Care Management Module
<b>PDM</b>	Pharmacy Data Management
<b>PDX</b>	Patient Data Exchange
<b>PFOP</b>	Personal Funds of Patients
<b>PGY 1-10</b>	Medical student status defined by Academic Affairs
<b>PIMS</b>	Patient Info Mgmt System (?) - formerly MAS (AD/R) & SD
<b>PL</b>	Problem List
<b>PM&amp;R</b>	Physical Medicine & Rehabilitation Services
<b>PMIS</b>	Patient Medication Information Sheet
<b>PN</b>	Progress Notes
<b>PPP</b>	Pharmacy Prescription Practices/Package
<b>PRD</b>	Product Requirements Document
<b>PRS</b>	Procurement of Automated Information Resources Solutions
<b>PTF</b>	Patient Treatment File
<b>QUIC</b>	Quality Improvement Checklist
<b>RAM</b>	Random Access Memory
<b>ROES</b>	Remote Order Entry System
<b>RPC</b>	Remote Procedure Call
<b>SCD</b>	Spinal Cord Dysfunction Registry
<b>SISP</b>	(VHA) Strategic Information Systems Plan
<b>SNOMED</b>	Systematized Nomenclature of Medicine
<b>SOAP</b>	Strategic Objective Assessment Plan for patient treatment plan
<b>SP</b>	Surgical Pathology
<b>SQL</b>	Structured Query Language
<b>SRS</b>	Software Requirement Specification
<b>Acronym</b>	<b>Meaning</b>
<b>T&amp;A</b>	Time and Attendance
<b>T&amp;L</b>	Time & Leave Unit
<b>TCP/IP</b>	Transmission Control Protocol/Internet Protocol
<b>TIU</b>	Text Integration Utilities

<b>UCI</b>	User Class Identification: a computing area or account
<b>UD</b>	Unit Dose Pharmacy
<b>UI</b>	Universal Interface, replacement system for Lab's LSI)
<b>UMLS</b>	Universal Medical Language System
<b>UR</b>	Utilization Review
<b>VA</b>	Department of Veterans Affairs
<b>VACO</b>	VA Central Office (headquarters)
<b>VADDC</b>	VA Denver Distribution Center
<b>VALNET</b>	VA Library Network
<b>VARO</b>	VA Regional Office
<b>VHA</b>	Veterans Health Administration
<b>VIC</b>	Veterans Identification Card
<b>VISN</b>	Veterans Integrated Service Network(s)
<b>VISTA</b>	Veterans Health Information System & Technology Architecture
<b>VS</b>	Vital Signs
<b>WLN</b>	Western Library Network
<b>WWW</b>	World Wide Web
<b>YOB</b>	Year of Birth

# Appendix A: Order Set Examples

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## Samples of West Palm Beach order sets

☛ **NOTE:** West Palm Beach enters “AXA” as the first letters of their order sets, as a distinguishing designation.

### ER Order Menu:

Menu: AXA ER LAB ORDERS

Column Width: 26

1		2		3		4
	CARDIAC	15	ASAP AMYLASE	43	STAT URINALYSIS	
1	STAT CBC + DIFF	16	LIPASE			
2	STAT CHEM 7	17	STAT PT/PTT		DIABETIC	
3	STAT CALCIUM	18	STAT URINALYSIS	61	STAT CBC + DIFF	
+4	STAT MAGNESIUM			62	STAT CHEM 7	
5	STAT ALBUMIN		ETOH/DRUG INGESTION	63	ASAP ACETONE	
6	STAT PT/PTT	31	STAT CBC + DIFF	64	STAT URINALYSIS	
7	STAT URINALYSIS	32	STAT CHEM 7	65	RT orders (abg gas)	
8	CK AND CK-MB	33	STAT ETOH LEVEL			
1		34	STAT TOX PROFILE PLUS		ADDITIONAL	
	GI	35	STAT URINALYSIS	90	BLOOD CULTURE	
11	STAT CBC + DIFF	36	STAT PT/PTT	91	BLOOD CX X 2 (15MIN)	
12	STAT CHEM 7	37	STAT CALCIUM			
13	ASAP LIVER 1	38	STAT MAGNESIUM	97	Microbiology	
+14	ASAP LIVER 2	39	STAT LIVER 1	98	Laboratory ...	
		40	STAT LIVER 2	99	Lab Tests by Name	

### Rheumatology Order Sets Menu:

- 1 Methtrexate Panel
- 2 Gold Panel
- 3 Initial Rheumatology Panel
- 4 Comprehensive Rheumatology Panel
- 5 Osteoporosis Panel
- 6 Synovial Fluid Panel

### General Admission Order Set:

- |    |                              |    |                                  |         |
|----|------------------------------|----|----------------------------------|---------|
| 1  | Admit to                     | 11 | Inpatient Meds                   | PRN ... |
| 2  | Diagnosis                    | 12 | IV Fluids                        |         |
| 3  | Condition                    | 13 | Laboratory ...                   |         |
| 4  | Enter/Edit Patient Allergies | 14 | Lab Order Sets ...               |         |
| 5  | Dietetic Orders ...          | 15 | Imaging ...                      |         |
| 6  | Activity/Privileges ...      | 16 | Consults                         |         |
| 7  | Vital Signs ...              | 17 | Attending MD for care of Patient |         |
| 8  | Nursing Care ...             | 18 | Code Status (DNR)                |         |
| 9  | Isolation / Precautions ...  |    |                                  |         |
| 10 | Inpatient Medications        |    |                                  |         |

## Samples of West Palm Beach order sets, cont'd

### Psychiatry Admission Order Set:

1	Admit to	13	Mental Health
2	Diagnosis	14	Lab Order Sets ...
3	Mental Health Condition	15	Imaging
4	Enter/Edit Patient Allergies	16	Consults
5	Dietetic Orders	17	MH Discharge Data
6	Mental Health Activity Order		
7	Vital Signs ...		
8	Nursing Care ...	30	Streichenwein Admit
9	Seclusion/Restraint	31	Streichenwein Detox
10	Isolation / Precautions ...	32	Mental Health Observation Orders
11	MH PRN medication		
12	Laboratory ...		

-----

### Detox Admission Order Set:

1	Admit to 4C	14	KAOLIN/PECTIN 30ML MAX 6/DAY
2	Diagnosis	15	PYRIDOXINE 50MG PO QD
3	Dietetic Orders	16	MAGNESIUM OXIDE 400MG PO BID
4	Allergies	17	MULTIVITAMIN 1 TAB PO QD
5	Mental Health Activity Order	18	FOLIC ACID 1MG PO QD
6	Vital Signs MH	19	THIAMINE 100MG PO QD
7	Lab: Routine admission	20	Librium 25mg PO QID X 24h (day 1)
8	CHEST	21	Librium 25mg PO TID X 24h (day 2)
9	Electrocardiogram	22	Librium 25mg PO BID X 24h (day 3)
10	MOM 60ML BID PRN	23	Librium 25mg PO once (day 4)
11	AL/MG OH SUSP 15ML PO Q2H PRN		
12	ACETAMINOPHEN 650MG PO Q4H PRN	25	Librium 50mg PO q4h prn X 96h
13	DIPHENHYDRAMINE 50MG PO QHSPRN		

## Samples of West Palm Beach order sets, cont'd

*This is what Order Sets look like in the Order Dialog file:*

### RENAL:

NAME: AXA RENAL DIALYSIS	DISPLAY TEXT: Dialysis Order Set
TYPE: order set	SIGNATURE REQUIRED: ORES
PACKAGE: ORDER ENTRY/RESULTS REPORTING	
CREATE PARENT ORDER: NO	DISPLAY SUBHEADER: YES
SEQUENCE: 1.1	ITEM: LRTZ MH/IM CBC BLOOD LAVENDER
SEQUENCE: 2.1	
ITEM: LRTZ MH/IMZ IM DIFF COUNT (BLOOD) BLOOD LAVENDER	
SEQUENCE: 7.1	
ITEM: LRTZ IM PROTEIN,TOTAL SERUM MARBLED	
SEQUENCE: 8.1	ITEM: LRTZ IM ALBUMIN SERUM MARBLED
SEQUENCE: 9.1	ITEM: LRTZ MH/IM ALT SERUM MARBLED
SEQUENCE: 10.1	ITEM: LRTZ IM AST SERUM MARBLED
SEQUENCE: 11.1	ITEM: LRTZ IM LDH SERUM MARBLED
SEQUENCE: 12.1	
ITEM: LRTZ IM ALKALINE PHOSPHATASE SERUM MARBLED	
SEQUENCE: 13.1	ITEM: LRTZ IM CALCIUM SERUM MARBLED
SEQUENCE: 15.1	ITEM: LRT CHEM 7 SERUM MARBLED
SEQUENCE: 3.1	ITEM: LRT IRON GROUP SERUM MARBLED
SEQUENCE: 4.1	ITEM: LRT BILIRUBIN,TOTAL SERUM MARBLED
SEQUENCE: 5.1	ITEM: LRT URIC ACID SERUM MARBLED
SEQUENCE: 6.1	ITEM: LRT PHOSPHORUS SERUM MARBLED
SEQUENCE: 14.1	ITEM: LRT CHOLESTEROL SERUM MARBLED
SEQUENCE: 16.1	ITEM: LRT MAGNESIUM SERUM MARBLED
SEQUENCE: 17.1	ITEM: LRT FERRITIN SERUM MARBLED
NAME: LRTZ MH/IM CBC BLOOD LAVENDER	DISPLAY TEXT: CBC
TYPE: quick order	DISPLAY GROUP: CHEMISTRY
SIGNATURE REQUIRED: ORES	PACKAGE: LAB SERVICE
VERIFY ORDER: NO	ASK FOR ANOTHER ORDER: NO
ITEM ENTRY: 1	DIALOG: OR GTX ORDERABLE ITEM
INSTANCE: 1	VALUE: 394
ITEM ENTRY: 7	DIALOG: OR GTX COLLECTION SAMPLE
INSTANCE: 1	VALUE: 3
ITEM ENTRY: 8	DIALOG: OR GTX SPECIMEN
INSTANCE: 1	VALUE: 70
NAME: LRTZ IM ALBUMIN SERUM MARBLED	DISPLAY TEXT: ALBUMIN
TYPE: quick order	DISPLAY GROUP: CHEMISTRY
SIGNATURE REQUIRED: ORES	PACKAGE: LAB SERVICE
VERIFY ORDER: NO	ASK FOR ANOTHER ORDER: NO
ITEM ENTRY: 1	DIALOG: OR GTX ORDERABLE ITEM
INSTANCE: 1	VALUE: 1400
ITEM ENTRY: 7	DIALOG: OR GTX COLLECTION SAMPLE
INSTANCE: 1	VALUE: 1
ITEM ENTRY: 8	DIALOG: OR GTX SPECIMEN
INSTANCE: 1	VALUE: 72
NAME: LRTZ MH/IM ALT SERUM MARBLED	DISPLAY TEXT: ALT
TYPE: quick order	DISPLAY GROUP: CHEMISTRY
SIGNATURE REQUIRED: ORES	PACKAGE: LAB SERVICE
VERIFY ORDER: NO	ASK FOR ANOTHER ORDER: NO
ITEM ENTRY: 1	DIALOG: OR GTX ORDERABLE ITEM
INSTANCE: 1	VALUE: 1403
ITEM ENTRY: 7	DIALOG: OR GTX COLLECTION SAMPLE
INSTANCE: 1	VALUE: 1
ITEM ENTRY: 8	DIALOG: OR GTX SPECIMEN
INSTANCE: 1	VALUE: 72

## Samples of West Palm Beach order sets, cont'd

NAME: LRTZ IM AST SERUM MARBLED	DISPLAY TEXT: AST
TYPE: quick order	DISPLAY GROUP: CHEMISTRY
SIGNATURE REQUIRED: ORES	PACKAGE: LAB SERVICE
VERIFY ORDER: NO	ASK FOR ANOTHER ORDER: NO
ITEM ENTRY: 1	DIALOG: OR GTX ORDERABLE ITEM
INSTANCE: 1	VALUE: 1404
ITEM ENTRY: 7	DIALOG: OR GTX COLLECTION SAMPLE
INSTANCE: 1	VALUE: 1
ITEM ENTRY: 8	DIALOG: OR GTX SPECIMEN
INSTANCE: 1	VALUE: 72
NAME: LRTZ IM LDH SERUM MARBLED	DISPLAY TEXT: LDH
TYPE: quick order	DISPLAY GROUP: CHEMISTRY
SIGNATURE REQUIRED: ORES	PACKAGE: LAB SERVICE
VERIFY ORDER: NO	ASK FOR ANOTHER ORDER: NO
ITEM ENTRY: 1	DIALOG: OR GTX ORDERABLE ITEM
INSTANCE: 1	VALUE: 1414
ITEM ENTRY: 7	DIALOG: OR GTX COLLECTION SAMPLE
INSTANCE: 1	VALUE: 1
ITEM ENTRY: 8	DIALOG: OR GTX SPECIMEN
INSTANCE: 1	VALUE: 72
NAME: LRTZ IM CALCIUM SERUM MARBLED	DISPLAY TEXT: CALCIUM
TYPE: quick order	DISPLAY GROUP: CHEMISTRY
SIGNATURE REQUIRED: ORES	PACKAGE: LAB SERVICE
VERIFY ORDER: NO	ASK FOR ANOTHER ORDER: NO
ITEM ENTRY: 1	DIALOG: OR GTX ORDERABLE ITEM
INSTANCE: 1	VALUE: 1406
ITEM ENTRY: 7	DIALOG: OR GTX COLLECTION SAMPLE
INSTANCE: 1	VALUE: 1
ITEM ENTRY: 8	DIALOG: OR GTX SPECIMEN
INSTANCE: 1	VALUE: 72
NAME: AXA RHEU METHOTREXATE PANEL	DISPLAY TEXT: Methotrexate Panel
TYPE: order set	SIGNATURE REQUIRED: ORES
PACKAGE: ORDER ENTRY/RESULTS REPORTING	
CREATE PARENT ORDER: NO	DISPLAY SUBHEADER: YES
SEQUENCE: 1.1	ITEM: LRT CBC BLOOD LAVENDER
SEQUENCE: 2.1	ITEM: LRT AST (SGOT) SERUM MARBLED
SEQUENCE: 3.1	
ITEM: LRT ALKALINE PHOSPHATASE SERUM MARBLED	
NAME: AXA RHEU GOLD PANEL	DISPLAY TEXT: Gold Panel
TYPE: order set	SIGNATURE REQUIRED: ORES
PACKAGE: ORDER ENTRY/RESULTS REPORTING	
CREATE PARENT ORDER: NO	DISPLAY SUBHEADER: YES
SEQUENCE: 1.1	ITEM: LRT CBC BLOOD LAVENDER
SEQUENCE: 2.1	ITEM: LRT URINALYSIS URINE
NAME: AXA RHEU INITIAL RHEU PANEL	DISPLAY TEXT: Initial
Rheumatology Panel	
TYPE: order set	SIGNATURE REQUIRED: ORES
PACKAGE: ORDER ENTRY/RESULTS REPORTING	
CREATE PARENT ORDER: NO	DISPLAY SUBHEADER: YES
SEQUENCE: 1.1	ITEM: LRT ANA SERUM MARBLED
SEQUENCE: 2.1	
ITEM: LRT RHEUMATOID FACTOR SERUM MARBLED	
SEQUENCE: 3.1	ITEM: LRT TSH SERUM MARBLED
SEQUENCE: 4.1	ITEM: LRT CK TOTAL SERUM MARBLED
SEQUENCE: 5.1	ITEM: LRT SED RATE BLOOD LAVENDER

## Samples of West Palm Beach order sets, cont'd

NAME: AXA RHEU COMPREHENSIVE PANEL  
DISPLAY TEXT: Comprehensive Rheumatology Panel  
TYPE: order set SIGNATURE REQUIRED: ORES  
PACKAGE: ORDER ENTRY/RESULTS REPORTING  
CREATE PARENT ORDER: NO DISPLAY SUBHEADER: YES  
SEQUENCE: 1.1  
ITEM: LRT ANTI-DNA (DOUBLE STRANDED) SERUM MARBLED  
SEQUENCE: 2.1  
ITEM: LRT ANTI-EXTRACTABLE NUCLEAR ANTIGEN SERUM MARBLED  
SEQUENCE: 3.1  
ITEM: LRT SJOGREN ANTIBODY SERUM MARBLED  
SEQUENCE: 4.1 ITEM: LRT COMPLEMENT C3 SERUM MARBLED  
SEQUENCE: 5.1 ITEM: LRT COMPLEMENT C4 SERUM MARBLED

NAME: AXA RHEU OSTEOPOROSIS PANEL DISPLAY TEXT: Osteoporosis Panel  
TYPE: order set SIGNATURE REQUIRED: ORES  
PACKAGE: ORDER ENTRY/RESULTS REPORTING  
CREATE PARENT ORDER: NO DISPLAY SUBHEADER: YES  
SEQUENCE: 1.1 ITEM: LRT CALCIUM SERUM MARBLED  
SEQUENCE: 2.1 ITEM: LRT MAGNESIUM SERUM MARBLED  
SEQUENCE: 3.1 ITEM: LRT PHOSPHORUS SERUM MARBLED  
SEQUENCE: 4.1 ITEM: LRT ALBUMIN SERUM MARBLED  
SEQUENCE: 5.1 ITEM: LRT PROTEIN, TOTAL SERUM MARBLED  
SEQUENCE: 6.1 ITEM: LRT THYROID PROFILE SERUM MARBLED  
SEQUENCE: 7.1  
ITEM: LRT ALKALINE PHOSPHATASE SERUM MARBLED  
SEQUENCE: 8.1 ITEM: LRT AST (SGOT) SERUM MARBLED  
SEQUENCE: 9.1 ITEM: LRT TESTOSTERONE SERUM  
MARBLED  
SEQUENCE: 10.1  
ITEM: LRT LEUTENIZING HORMONE SERUM MARBLED  
SEQUENCE: 11.1 ITEM: LRT 25 OH VITAMIN D SERUM MARBLED

NAME: AXA RHEU SYNOVIAL FLUID PANEL DISPLAY TEXT: Synovial Fluid Panel  
TYPE: order set SIGNATURE REQUIRED: ORES  
PACKAGE: ORDER ENTRY/RESULTS REPORTING  
CREATE PARENT ORDER: NO DISPLAY SUBHEADER: YES  
SEQUENCE: 1.1  
ITEM: LRT CELL COUNT (FLUID) SYNOVIAL FLUID LAVENDER  
SEQUENCE: 2.1  
ITEM: LRT SYNOVIAL CULTURE SYNOVIAL FLUID STERILE  
SEQUENCE: 3.1  
ITEM: LRT SYNOVIAL FLUID CRYSTALS SYNOVIAL FLUID LAVENDER

## Appendix B: West Palm Beach's description for GUI menu creation

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Subj: **GUI Order Menus** [#29274058] 24 Mar 99 07:33 247 lines  
From: BEARD,DEWAINE (West Palm Beach) 1 of 1 response read. In 'IN' basket.  
Page 1

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As requested on the CPRS call yesterday, here are some differences between the two XPAR parameters that control what appears in the Write Orders box on the Orders tab of the CPRS GUI.

The GUI is distributed with the standard ordering dialogs entered into the ORWOR WRITE ORDERS LIST parameter at the Package level.

Example: Sequence -----	Value -----
20	GMRAOR ALLERGY ENTER/EDIT
30	FHW1
52	PSJ OR PAT OE
55	PSO OERR
58	PSJI OR PAT FLUID OE
60	LR OTHER LAB TESTS
70	RA OERR EXAM
80	GMRCOR CONSULT
85	GMRCOR REQUEST
90	GMRVOR
99	OR GXTEXT WORD PROCESSING ORDER

The advice nationally has been to add/delete from this list or to build a customized list at the System level. This is what West Palm Beach and many others sites have done.

Example: Sequence -----	Value -----
2	GMRAOR ALLERGY ENTER/EDIT
5	FHW1
7	GMRVOR
10	PSJ OR PAT OE
15	PSJI OR PAT FLUID OE
20	PSO OERR
21	ORZ GMENU GUI RXOP MAIN MENU
25	LR OTHER LAB TESTS
26	ORZ GMENU GUI LAB QUICK
28	ORZ GMENU GUI LAB ONCE
30	RA OERR EXAM
40	OR GXTEXT WORD PROCESSING ORDER
44	ORZ GMENU GUI CONSULTS MAIN
47	ORZ GMENU GUI ER MAIN
50	ORZ ADD MENU CLINICIAN

Some noted limitations/problems with this approach include:  
#1. Maintenance! The XPAR menu is difficult for even IRM staff to get to, it is not very friendly (there is no edit template for ORWOR WRITE ORDERS LIST), and thus the CACs generally cannot maintain what appears there.

#2. Need for care when controlling what folks see. If you have a group of users that you want to limit access or give special access to, you must re-enter all items you want them to have at the individual USER level.



(possible E3R or NOIS for the enterprising--the Location level does not appear to have any effect on the limited tests I have done)

\*\*\*\*\*

Some ways around these limitations can be found by using the approach pioneered in VISN 8 by CACs Ruth Gorman and Regina Crane with the fantastic support of their IMS support Prima! During testing for CPRS they discovered that if you put an add order screen into the XPAR parameter ORWDX WRITE ORDERS LIST, that the contents of that menu appear in the Write Orders box on the Orders Tab of CPRS GUI.

This parameter is also a bit more flexible because where you can assign ORWOR WRITE ORDERS LIST only to Package, System, Location and User, ORWDX WRITE ORDERS LIST can be assigned to System, Division, and User. Since Gainesville and Lake City are integrated, the divisional parameter was particularly useful for them.

Prima made a very simple order screen that had all the order dialogs listed above in the same order, then she made an empty generic order dialog with display text of ----- to create a line in the list of items in the Write Orders box, and placed the local menus or dialogs below that. The menu was only 1 column wide, and it mimiced the functionality of the ORWOR WRITE ORDERS LIST perfectly!

This made maintenance a breeze for the CACs because they only had to edit the menu through their CAC tools (Menu Management) and the changes would be reflected in the GUI--no IRM involvement.

While IRM still needs to help when you are restricting/changing access for individual users... once a user has an individual or group menu assigned via this parameter, any subsequent changes you might need to make to them can easily be made by simply editing the contents of the menu they have assigned to them.

An example of how this parameter entry looks:

Select PARAMETER DEFINITION NAME: ORWDX WRITE ORDERS LIST Menu

ORWDX WRITE ORDERS LIST may be set for the following:

2	User	USR	[choose from NEW PERSON]
7	Division	DIV	[WEST PALM BEACH, FL]
8	System	SYS	[WEST-PALM.VA.GOV]

Enter selection: 2 User NEW PERSON

Select NEW PERSON NAME: beard,dewaine L DLB 711

----- Setting ORWDX WRITE ORDERS LIST for User: BEARD,DEWAINE L -

Order Dialog: orz add menu test

1	ORZ ADD MENU TEST
2	ORZ ADD MENU TEST COFFEY
3	ORZ ADD MENU TEST2
4	ORZ ADD MENU TESTING MODE

CHOOSE 1-4: 1 ORZ ADD MENU TEST

ORWDX WRITE ORDERS LIST may be set for the following:

2	User	USR	[choose from NEW PERSON]
7	Division	DIV	[WEST PALM BEACH, FL]
8	System	SYS	[WEST-PALM.VA.GOV]

Enter selection:

\*\*\*\*\*

Now you will ask me... it is four months down the road and a user is calling with a problem, how can I figure out which menu they have assigned in the GUI? Great question!!!

That used to be held directly in the new person file, then it moved to the Parameter file.... so... In fileman (or your IRM can make an option for you) can do a search or a print or enter edit. For me, right now, I get the most reliable results from enter/edit, even though it is a bit of a pain. (mostly because my searches come up empty--grin) I am in to test many things and I have set many of my own personal parameters to see how they work so that I can teach others, so my list is very long! A "Common User" would have a shorter list (Typically <20). Anyway, here is your example using me, I hope this helps!

```
Enter or Edit File Entries
Print File Entries
Search File Entries
Modify File Attributes
Inquire to File Entries
Utility Functions ...
Data Dictionary Utilities ...
Transfer Entries
Other Options ...
```

You have PENDING ALERTS

Enter "VA VIEW ALERTS to review alerts

Select VA FileMan Option: ENTER or Edit File Entries

INPUT TO WHAT FILE: PARAMETERS//  
EDIT WHICH FIELD: ALL//

Select PARAMETERS ENTITY: BEARD BEARD,DEWAINE L DLB 711  
...OK? Yes// (Yes)

```
1 OR ADD ORDERS MENU 1
2 ORLP DEFAULT PROVIDER 1
3 ORLP DEFAULT LIST ORDER 1
4 ORLP DEFAULT TEAM 1
5 ORLP DEFAULT CLINIC MONDAY 1
```

Press <RETURN> to see more, '^' to exit this list, OR  
CHOOSE 1-5:

```
6 ORLP DEFAULT CLINIC TUESDAY 1
7 ORLP DEFAULT CLINIC WEDNESDAY 1
8 ORLP DEFAULT CLINIC THURSDAY 1
9 ORLP DEFAULT CLINIC FRIDAY 1
10 ORLP DEFAULT CLINIC SATURDAY 1
```

Press <RETURN> to see more, '^' to exit this list, OR  
CHOOSE 1-10:

```
11 ORLP DEFAULT CLINIC SUNDAY 1
12 ORLP DEFAULT CLINIC START DATE 1
13 ORLP DEFAULT CLINIC STOP DATE 1
14 ORB SORT METHOD 1
15 ORWCH BOUNDS frmFrame
```

Press <RETURN> to see more, '^' to exit this list, OR

```

CHOOSE 1-15:
  16          ORWCH WIDTH      frmProblems.pnlLeft
  17          ORWCH WIDTH      frmOrders.pnlLeft
  18          ORWCH WIDTH      frmNotes.pnlLeft
  19          ORWCH WIDTH      frmConsults.pnlLeft
  20          ORWCH WIDTH      frmDCSumm.pnlLeft
Press <RETURN> to see more, '^' to exit this list, OR
CHOOSE 1-20:
  21          ORWCH WIDTH      frmLabs.pnlLeft
  22          ORWCH WIDTH      frmReports.pnlLeft
  23          ORWCH COLUMNS    frmOrders.hdrOrders
  24          ORWCH COLUMNS    frmMeds.hdrMedsIn
  25          ORWCH COLUMNS    frmMeds.hdrMedsOut
Press <RETURN> to see more, '^' to exit this list, OR
CHOOSE 1-25:
  26          ORLP DEFAULT WARD      1
  27          ORB PROCESSING FLAG      DNR EXPIRING
  28          ORQQRA SEARCH RANGE      1
  29          ORQQCN SEARCH RANGE      1
  30          ORQQAP SEARCH RANGE START 1
Press <RETURN> to see more, '^' to exit this list, OR
CHOOSE 1-30:
  31          ORQQAP SEARCH RANGE STOP 1
  32          ORQQVS SEARCH RANGE START 1
  33          ORQQVS SEARCH RANGE STOP 1
  34          ORK PROCESSING FLAG      ERROR MESSAGE
  35          OR ORDER REVIEW DT      HUGGINS,RICHARD
Press <RETURN> to see more, '^' to exit this list, OR
CHOOSE 1-35:
  36          OR ORDER REVIEW DT      LISO,EMANUEL
  37          ORB PROCESSING FLAG      NEW ORDER
  38          ORB ORDERABLE ITEM RESULTS      SODIUM (SERUM)
  39          ORB PROCESSING FLAG      SITE-FLAGGED ORDER
  40          ORWDQ CSLT      1
Press <RETURN> to see more, '^' to exit this list, OR
CHOOSE 1-40:
  41          ORB PROCESSING FLAG      MEDICATIONS EXPIRING
  42          ORWOR TIMEOUT CHART      1
  43          OR ORDER REVIEW DT      DIETCH,ROBERT E
  44          ORK PROCESSING FLAG      BIOCHEM ABNORMALITY FOR CON
  45          ORB PROCESSING FLAG      NEW SERVICE CONSULT/REQUEST
Press <RETURN> to see more, '^' to exit this list, OR
CHOOSE 1-45:
  46          ORWDQ LAB      1
  47          ORWDQ LAB      2
  48          ORLP DEFAULT LIST SOURCE      1
  49          ORB PROCESSING FLAG      UNVERIFIED MEDICATION ORDER
  50          ORB ORDERABLE ITEM ORDERED      VANCOMYCIN CAP,ORAL
Press <RETURN> to see more, '^' to exit this list, OR
CHOOSE 1-50:
  51          ORB ORDERABLE ITEM ORDERED      VANCOMYCIN INJ
  52          ORB ORDERABLE ITEM ORDERED      VANCOMYCIN ORAL SOLN
  53          ORB ORDERABLE ITEM ORDERED      VANCOMYCIN HCL 50MG/
  54          ORB ORDERABLE ITEM ORDERED      VANCOMYCIN INJ *
  55          ORCH CONTEXT ORDERS      1
Press <RETURN> to see more, '^' to exit this list, OR
CHOOSE 1-55:
  56          ORWDX WRITE ORDERS LIST      1
CHOOSE 1-56: 56          ORWDX WRITE ORDERS LIST      1
ENTITY: BEARD,DEWAINE L//
PARAMETER: ORWDX WRITE ORDERS LIST//
INSTANCE: 1//

```

VALUE: ORZ ADD MENU TEST// <-----at long last!!! here is their menu!  
WORD PROCESSING TEXT:  
    No existing text  
    Edit? NO//  
M CODE: ^

Select PARAMETERS ENTITY:

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